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1948

ILLINOIS. MEDICAL CENTER COMMISSION  
STATE OF ILLINOIS MEDICAL CENTER  
DISTRICT



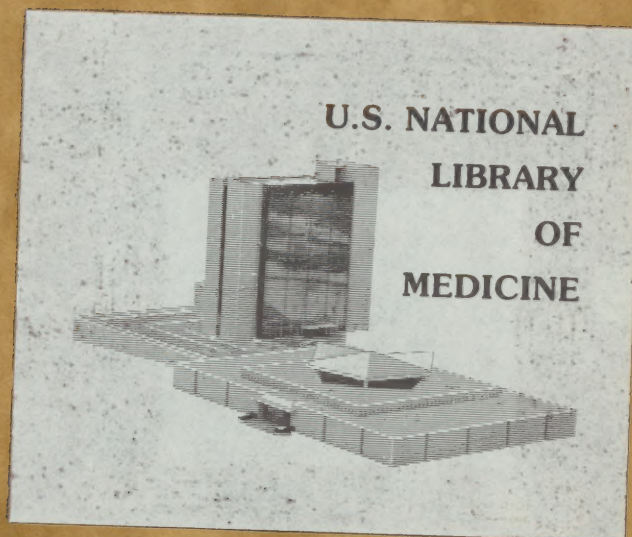
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State of Illinois

# MEDICAL CENTER DISTRICT

Chicago, Illinois



## FACT BOOK

A Description of the Research, Healing and Teaching  
Institutions Which Constitute the District . . . Their  
History . . . and a Glance at the Future



**MEDICAL CENTER COMMISSION**

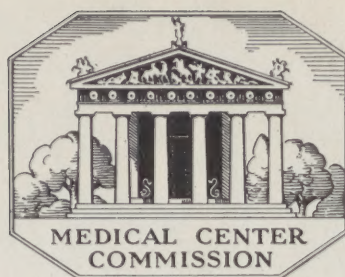
**736 South Ashland Boulevard**

**Chicago 7, Illinois**









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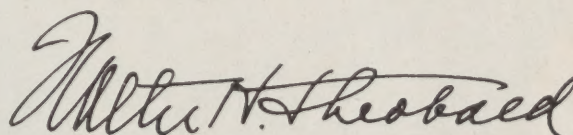
## INTRODUCTORY MESSAGE

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The purpose of this report is to furnish opportunity for study of the Medical Center District's tremendous resources, and to provide easily accessible information regarding the varied and magnificent institutions contained within the District, for planning and general reference purposes.

Here in these pages is a record of the pioneers, to the extent of available facts, who conceived the medical center idea and who—aware of the “imperative dominance of a fixed idea”—labored to bring it into being and helped it grow. This story of achievement to date brings into focus the foundation upon which we are building. That which has already been accomplished, as recorded here, cannot help but inspire those who crusade for realization of the dream bequeathed us by the pioneers.

Respectfully,

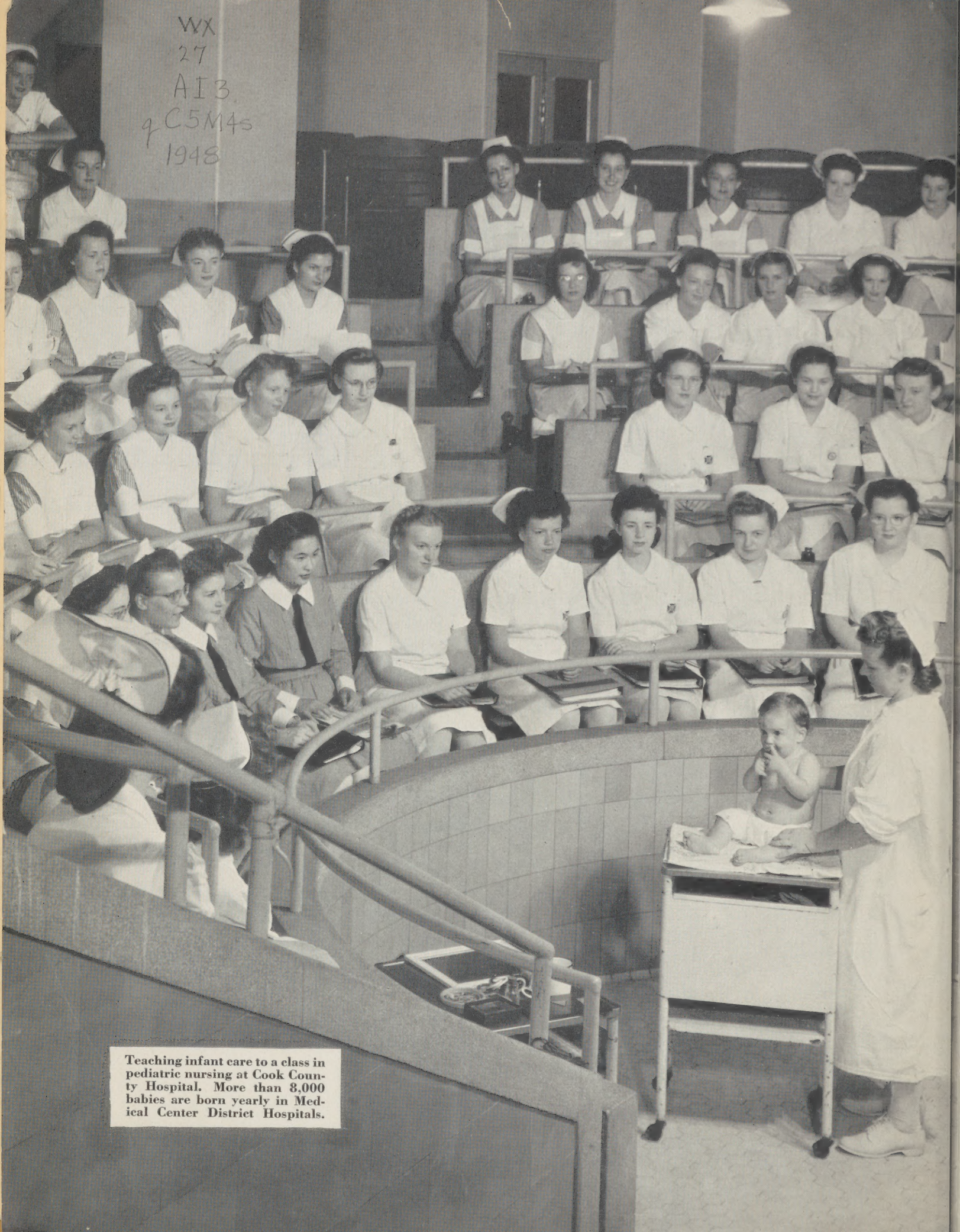


President, Medical Center Commission

736 S. Ashland Blvd.  
Chicago 7, Illinois  
November, 1948



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1948



Teaching infant care to a class in pediatric nursing at Cook County Hospital. More than 8,000 babies are born yearly in Medical Center District Hospitals.



# *Dedicated to*

**Hon. DWIGHT H. GREEN**

Governor of Illinois

and

**Hon. ADLAI E. STEVENSON**

Governor-elect of Illinois

**Hon. William N. Erickson**

President  
Board of Cook County  
Commissioners

**Hon. Martin H. Kennelly**

Mayor of Chicago

**Hon. James H. Gately**

President  
Chicago Park District

Who, by virtue of their respective offices and by provisions of the Medical Center Act passed by the Illinois State Legislature in 1941, as amended 1943-47, appoint the members of the

## **MEDICAL CENTER COMMISSION**

**Walter H. Theobald, M.D.,** President

**Lester J. Norris**

Vice President

**Albert D. Farwell**

Treasurer

**David H. Brill**

Secretary

**C. Hilding Anderson**

**Carl Stockholm**

**Walter A. Wade**

## **Executive Staff**

**Walter J. Kelly,** Executive Director

**Albert J. Horrell,** General Counsel

**E. Todd Wheeler,** Director of Planning

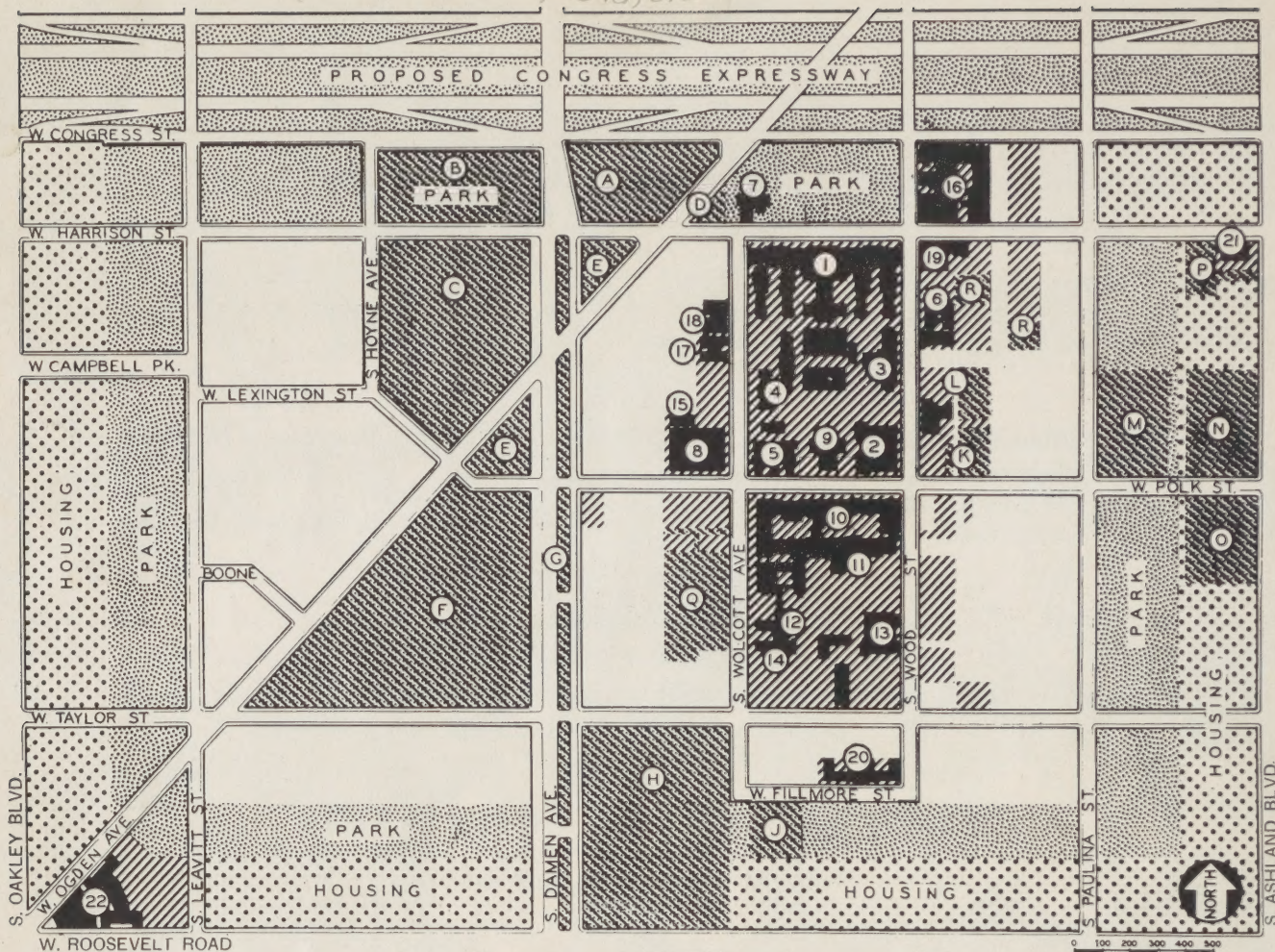
**Louis C. Keter,** Property Manager

**Ernest E. Sandsteel,** Construction Supt.

Published in November, 1948



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## State of Illinois MEDICAL CENTER DISTRICT IN CHICAGO

DIAGRAM SHOWING PRESENT DEVELOPMENT—AND LAND BEING PURCHASED FOR EXPANSION OF FACILITIES  
—THE GREATEST MEDICAL CENTER DEVELOPMENT PROGRAM IN THE WORLD

(See chart above)

### EXISTING INSTITUTIONS

and Land They Now Own

1. Cook County General Hospital
2. Cook County Psychopathic Hospital
3. Cook County Children's Hospital
4. Cook County Contagious Hospital
5. Cook County T. B. Hospital
6. Cook County Hektoen Institute
7. Cook County Fantus Clinic
8. Cook County School of Nursing
9. Cook County Institute of Legal Medicine (County Morgue)
10. University of Illinois Medical, Dental and Pharmacy Colleges
11. University of Illinois General Hospital
12. University of Illinois Surgical Institute for Children
13. Illinois Neuropsychiatric Institute (State Dept. of Public Welfare)
14. Institute for Juvenile Research (State Dept. of Public Welfare)
15. Cook County Department of Public Welfare
16. Presbyterian Hospital
17. Chicago Medical School
18. Loyola Medical School
19. Loyola Dental School
20. Bacteriological Laboratories (State Dept. of Public Health)
21. St. Paul Methodist Church
22. Cook County Juvenile Court and Detention Home

### LAND PURCHASE PROGRAM

Showing Project Sites Now Owned by Medical Center Commission, or Being Acquired by the Commission (except "F" and "Q") Through Condemnation for:

- A. Chicago Medical Society
- B. Park
- C. Loyola Medical and Dental Campus
- D. Park
- E. Park
- F. To be purchased by the Veterans Administration for a 1,000 bed Acute General Hospital
- G. Damen Ave. Parkway (For later development)
- H. State Tuberculosis Hospital—part of site
- J. Park
- K. Institution for Tuberculosis Research (BCG)
- L. Cook County Graduate School of Medicine
- M. Interim Housing
- N. Housing
- O. Housing
- P. St. Paul Methodist Church
- Q. To be purchased by the University of Illinois for student residences, and for a nurses' residence and school
- R. Presbyterian Hospital Project Areas



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# LAND OWNERSHIP

## MEDICAL CENTER DISTRICT

as of January 2, 1948

### A. Medical and Other Institutions

Related to the purpose of the Medical Center Act

|   | <u>Square Feet</u>   | <u>Acres</u> |
|---|----------------------|--------------|
| 1. State of Illinois                                  |                      |              |
| a. Medical Center Commission.....                     | 787,675              | 18.0         |
| b. University of Illinois.....                        | 608,071              | 13.9         |
| c. Department of Public Health.....                   | 32,873               | 0.8          |
| d. Department of Public Welfare.....                  | 43,760               | 1.2          |
|   | <hr/> 1,482,379      | <hr/> 33.9   |
| 2. County of Cook                                     |                      |              |
| a. Cook County Hospital.....                          | 638,110              | 14.6         |
| b. Cook County School of Nursing.....                 | 44,957               | 1.0          |
| c. Hektoen Institute.....                             | 16,850               | 0.4          |
| d. Cook County Juvenile Court and Detention Home..... | 128,442              | 3.0          |
| e. Cook County Department of Public Welfare.....      | 10,399               | 0.2          |
|   | <hr/> 838,758        | <hr/> 19.3   |
| 3. Non-Governmental                                   |                      |              |
| a. Presbyterian Hospital.....                         | 148,050              | 3.4          |
| b. Loyola Medical School.....                         | 12,000               | 0.3          |
| c. Loyola School of Dentistry.....                    | 26,000               | 0.6          |
| d. Chicago Medical School.....                        | 33,200               | 0.8          |
|   | <hr/> 219,250        | <hr/> 5.1    |
| Total area controlled by Medical Center Institutions  | 2,540,387            | 58.3         |
| B. City of Chicago Property                           |                      |              |
| 1. Streets and Alleys.....                            | 4,356,000            | 100.0        |
| 2. Other City Property.....                           | 211,616              | 4.9          |
|   | <hr/> Sub Total City | <hr/> 104.9  |
| C. Church Properties.....                             | 275,114              | 6.3          |
| D. Commercial and Industrial Properties.....          | 302,961              | 6.9          |
| E. All Other Private Property.....                    | 5,599,722            | 128.6        |
|   | <hr/> Grand Total    | <hr/> 305.0  |



# MEDICAL CENTER DISTRICT

*"Character of a Civic Plan . . ."*

**FOUNDED** on old established institutions the Medical Center District now covers 305 acres on Chicago's crowded west side . . . includes six hospitals and seven medical schools—1,200 doctors (800 daily) and 4,000 nurses in attendance . . . 5,000 hospital beds . . . 96,000 hospital patients per year and 500,000 ambulatory patient visits annually.

**F**OR WELL OVER a half-century the area now set apart by the State of Illinois as the Medical Center District in Chicago has had world-wide recognition as an outstanding group of hospitals, medical schools and research institutions.

Closely associated with it before the turn of the century was the growth of the Cook County Hospital, Rush Medical College, the College of Physicians and Surgeons—which later became affiliated with the University of Illinois—and the Presbyterian Hospital. There were other institutions later merged with present facilities.

All of these institutions were well established in the District area on Chicago's west side during the years following the Chicago Fire, in 1871.

Rush was the pioneer medical college of the Mid-west. It received its charter from the Illinois State Legislature in 1837, the same year that Chicago was granted its charter as a city.

Many famous physicians were graduated from this school.

Growth of the Cook County Hospital was phenomenal after it started with a clean slate in its present location immediately following the historic fire.

The thought of giving this area between Ashland and Oakley Boulevards, Congress Street and Roosevelt Road a special medical center identity was first put into words by Charles H. Thorne the same year that he was appointed director of the Illinois Department of Public Welfare in 1917—four years after the University of Illinois had taken over the College of Physicians and Surgeons to become the University of Illinois College of Medicine.

At that time Chicago was entering an era of sprucing up with many civic improvements. Charles H. Wacker, president of the Chicago Plan Commission, was the guiding genius in bringing about these improvements.

On a November morning in 1917 Mr. Wacker sat down at his desk in the Plan Commission offices and opened a letter from Mr. Thorne. The letter said in part:

" . . . I am sending a plan for a proposed group of medical units, together with a short argument in their favor . . . it has the character of a civic plan. I am confident you will see at once the advantage of a great medical center, such as this will be, if consummated. I have conferred with the officials of the University of Illinois and they are ready to act . . . the Department of Public Welfare is ready to act."

The plan Mr. Thorne proposed at that time proved to be the first rough draft of the plan which is taking shape today for the Medical Center District. It was promptly approved by Mr. Wacker at the time. His successors have followed through. The Chicago Plan Commission has continued to

provide technical assistance, especially when the Medical Center Commission was without funds at the beginning and was cautiously feeling its way along, reaching out for maps of the district and graphs for various kinds of studies.



WALTER H. THEOBALD, M.D.  
President,  
Medical Center Commission

## Thorne Name Recurs

As the histories of the institutions are recounted in these pages the names of Charles H. Thorne, the Chicago Plan Commission, the University of Illinois, and the Cook County Hospital will recur from time to time as influences in their development.

When Mr. Thorne advised Mr. Wacker that the University of Illinois and the Department of Public Welfare were ready to act, conferences were approaching a formal agreement whereby the University and the Department would cooperate in the construction and operation of State hospitals. The University had reached a critical period as to whether it could

continue to maintain an approved College of Medicine without a hospital under its own supervision whereby it could provide clinical teaching and research.

Mr. Thorne was in full accord that the State should be actively concerned in searching out preventive measures as well as cures for disease. The formal agreement was signed in 1919 and, shortly after, the legislature appropriated to the Department funds for the purchase of the old West Side Ball Park, south of the County Hospital. Three hospitals were completed there in 1924. And that was the first big step toward the consummation of the Thorne Medical Center plan. Mr. Thorne's term expired in 1921 and in recent years he has been living in Pasadena, California. The program he launched continues under its original impetus.

During the decade following Mr. Thorne's term as director of the Illinois Public Welfare Department various committees and groups carried on a campaign to have the State take an active part in the development of the District. Doctors and business leaders envisioned the replacement of outworn buildings and congested tenements by modern institutional buildings, parks and driveways. Community interests could not achieve such extensive improvements by themselves. The Medical Center, they believed, should serve more than the community, more than the city and the county. It should serve the state of Illinois and the world.

## Leaders in Movement

The names of some of those men appear repeatedly in the memberships of the various groups that carried the idea forward, gaining ground each succeeding year. Prominently mentioned are the names of the late Col. A. A. Sprague, and



the late Ray McCarthy, Dr. Walter H. Theobald, the late Dr. Bernard Fantus, David H. Brill, Albert D. Farwell, Dr. Karl A. Meyer, Michael Zimmer, Alderman James B. Bowler, Mrs. Glenn E. Plumb, Senator Frank Ryan, and State Rep. Vito Marzullo.

When Col. Sprague became commissioner of public works for the city of Chicago in 1925 at the request of Alderman James B. Bowler, he interested himself especially in the plans for the Medical Center District. The following year he asked the Chicago Plan Commission to make some preliminary estimates and some sketches leading to a general plan for the District. In complying with the request, the Plan Commission took the first tangible steps leading to the ultimate concept for the plan.

### Demand Action

From that time on representatives of the various institutions in the center, and various civic groups—notably the



LESTER J. NORRIS  
Vice President

West Central Association, pressed for action in the proposed development. Building plans on a large scale were announced. In September of 1929 Dr. Arthur Dean Bevan made known the completion of an irrevocable trust fund amounting to \$1,195,350 for the development of the Presbyterian Hospital and Rush Medical School. The following February (1930) the University of Illinois announced it would begin the construction of buildings on the campus south of the county hospital at a cost of \$1,

500,000. Four of the buildings were dedicated in October of that same year and the cornerstone laid for a fifth.

Hopes were now directed at creating an official organization to coordinate these efforts—an organization that could serve as a clearing house to survey and plan on a broad scale to the best interests of all concerned. This would require general financing. A meeting was called January 21, 1931, in the offices of the Chicago Plan Commission. Attending this meeting were Col. Sprague, James Simpson, Michael Zimmer, Hugh E. Young, E. S. Taylor, President H. W. Chase and Dean Charles M. Thompson of the University of Illinois. They decided to appeal to the state legislature for an appropriation of \$100,000 to finance the cost of survey and plans.

Subsequent conferences with other officials brought out the idea that an appropriation for a smaller amount would stand a much better chance for approval. It was then proposed that the State would appropriate \$25,000 to be matched by a County appropriation for the same amount. A bill making this appropriation was approved June 17, 1931. The appropriation was made to the Department of Public Welfare to be distributed to the Chicago Plan Commission. The Board of Cook County Commissioners, however, failed to appropriate the equivalent \$25,000 and the funds voted by the legislature were allowed to lapse and become void.

Whether or not this frustration had an adverse effect on the state legislature is a matter of opinion. However, it is a matter of record that four bills to authorize the development of the proposed medical center were introduced during the late thirties and all four failed to pass.

The forces of public spirited citizens, who had been thwarted again and again in their progressive efforts, may have felt after this it was time to let the matter rest for a while, but not for long. In September an organization of doctors and others who had previously participated, incorporated what was called the "Medical Park in Chicago," with Dr. Bernard Fantus as president.

### New Tactics

This group sponsored a bill in 1935 entitled an "Act to Provide for the Organization, Management and Regulation of Medical Park Authority at Chicago." The Park covered the area occupied by institutions and it was specified that "the suggestion is of such an area that it will surround the present institutions with park land which can be consolidated by the vacation of certain minor streets and alleys."

Legislators were given the benefit of a considerable research accomplished by John Wentworth relative to the legal aspects and proposed administration. It was believed that this time the legislature was provided with ample and convincing argument to warrant passage of the bill. But the old jinx still held and this bill, too, fell by the wayside.

Everybody agreed that John Wentworth had marshalled considerable strength in the unending struggle and, though five bills had gone down to defeat, there were hopeful signs that at last they were on the right track. Lines were reformed. Replacements filled a few vacancies and with John Wentworth heading up a new organization and Dr. Fantus serving as co-chairman the drive was resumed.

The new organization was called the Medical Square Commission. Other members of the commission, as appointed by the Mayor of Chicago, were: F. C. Woodward, vice-president, University of Chicago; Rev. Samuel K. Wilson, S. J., president, Loyola University; Dr. Walter H. Theobald, Illinois Research Hospital; Asa Bacon, Presbyterian Hospital; Dr. Andrew J. Toman, University of Illinois Hospital; Dr. Karl Meyer, Cook County Hospital; and Nicholas Forte, Medical Park Association.

The situation was sized up somewhat along these lines: The state legislators were skeptical. They once had made a small grant contingent of local county support. The enthusiasts had failed to achieve that support. Having failed in this respect what assurance did the legislature have that the committee would be competent to function, or properly administer funds and powers sought from the State? The new tactics would correct such a misconception. The Medical Square Commission would have to demonstrate in a sizable project what they could do, handicapped as they were for lack of funds and adequate authority.

### The "Old Look"

By a fortuitous circumstance it happened about this time that a civic minded citizen who has a long record of getting big things done in a big way happened to be in the Presbyterian hospital. He had been a member of the hospital board for many years, but on this occasion he was under medical



ALBERT D. FARWELL  
Treasurer



care. He looked out the window at a dismal and depressing sight of grimy, dilapidated buildings. The view gave him a pain no doctor could cure.

"It's enough to make a man sick just to be in such an environment," he said.

Not long after this Philip R. Clark, president of the City National Bank, became president of the Commercial Club and he still remembered that view from the window of the Presbyterian hospital. The fact that he had become president of the Commercial Club had a bearing on the problem of the antiquated buildings for the Commercial Club is concerned with civic improvements. Long ago the Commercial Club had fathered the Burnham plan that initiated the City Plan Commission. To get the Burnham plan going this small and select club had appropriated \$303,100. That's a lot of money for an organization of 100 to 125 members. You had to be somebody to be elected to membership, and to qualify the members scrutinize your record for distinguished civic service.

Its President, Mr. Clark, observed that the time had come for the Commercial Club to undertake a noteworthy civic project. He proposed that an effort should be made to assist the Medical Square Commission in obliterating the old structures in front of the Cook County Hospital and the Presbyterian Hospital, and converting the area into a convalescent park. The other members concurred and he appointed a committee to work on the project. Robert Kingery, director of the Regional Planning Association, was engaged to serve as executive director of the committee.

Mr. Kingery and his committee and the Medical Square Commission then launched into "Operation Convalescent

Park" with a pincer movement against the old institutional buildings and the ownership powers behind those buildings. They found the county and city officials earnestly supporting them. They had no big operating fund with which to buy and sell, so they approached the problem on a barter and trade basis.

### Basic Test

Having progressed to this point they came to the test, the very basic test, as to their own

strength. It was a test of time, work, administration, negotiation and salesmanship, patience, sacrifice and determination. Among the members of the commission and the committee were representatives of owners of a large share of the properties involved.

They divided the area into seven sections and counseled on the problems of each section. Could one owner be expected to surrender more than another? What terms? Outright donation, or long-term leases at one dollar a year?

How far would the City go in surrendering its school property? "We will go along with the universities. What are they going to do?" the mayor replied. The city had plans all drawn for a \$300,000 warehouse on the school property. The University trustees would not meet for a month. It was believed they were agreeable but the deal would have to be formally ratified at a meeting. Would the school board please wait before they started building?

These and a hundred other hitches kept the commission

and committee members on edge for months until at last all the tangles were untied. They even completed arrangements for the WPA and the City Small Parks to cooperate in clearing and landscaping, with the help of Alderman James B. Bowler. Only the old West Side Hospital and the one-story Maggos buildings were left, the former being taken over temporarily for the Fantus Outpatient Clinic. Demolition squads went to work. Debris disappeared. The rugged surface of the ground melted out of sight beneath a blanket of rich, black loam. Little trees were planted and in the spring the black dirt faded beneath a carpet of green young grass.

### Mission Completed

Operation Convalescent Park was completed. It was such a park as had been envisioned from the beginning. All Chicago could see the majestic facade of the two-block long County Hospital. *(In 1946 a special fund was raised by private subscription to move the \$100,000 Pasteur monument from Burnham Park to the center of Convalescent Park. Honore street, between Congress and Harrison streets was closed off and further improvement will fill in the street and level it off with the rest of the park).* All was now ready, with a working model, to demonstrate to the legislature that a state commission could function effectively and efficiently.

During this period of material achievement the Medical Square Commission strengthened its local support and broadened the field of its influence by calling together chief executives of many institutions and public officials. State Senator Frank Ryan and Representative Vito Marzullo attended meetings and became very much interested in the plan for the center.

It was a long and carefully directed, though quietly conducted, campaign. As a result when the General Assembly convened in 1941 they were provided with full information of what had been accomplished. Bills were introduced both in the House and the Senate to create the Medical Center Commission. The Senate bill was introduced by Senator Ryan and the House bill by Representative Marzullo. Thus the plan was doubly fortified. The bill that became the law was passed June 4, 1941. Back in Chicago a telegram, announcing the fact, was greeted with cheers.

### Highlights of the Act

In brief, here are some of the highlights of the Medical Center District Act, which was amended for more effective administration in 1943 and 1947:

"There is created in the city of Chicago a Medical Center District . . . whose boundaries are Ashland Boulevard on the east, Congress Street on the north, Oakley Boulevard on the west, and Roosevelt Road on the south. . . .

"A Medical Center Commission . . . is created . . . to consist of seven members, four of whom shall be appointed by the Governor, one by the Mayor of Chicago, one by the President of the County Board of Cook County, and one by the President of the Chicago Park District. . . .

"The Commission shall so improve and manage such District as to provide conditions most favorable for the special care and treatment of the sick and injured and for the study of disease . . . the Commission shall classify, regulate and restrict the location and construction of buildings in the District . . . shall . . . determine the area of open space within and around such buildings and prohibit the use of buildings and structures incompatible with the character of



DAVID H. BRILL  
Secretary



the District, to the end that adequate light, air, quietness and safety from fire and from the communication of diseases and other dangers may be secured. . . .

"The Commission is authorized to acquire real property lying within the District . . . under provisions of 'An Act to provide for the exercise of the right of eminent domain' . . . may sell or lease any parcel of real estate to any medical or allied institution, for the purpose stated."



C. HILDING ANDERSON  
Commissioner

Thus the Medical Center Commission came into existence as a state agency authorized to achieve its ends through a legally established code for performance. But the legislature was still wary about providing funds. No money was appropriated at this session.

The Commission was first organized with five members. Ray McCarthy was named president; Col. Albert A. Sprague, secretary treasurer and the other three members were Dr. Walter H. Theobald, George A. Barr, and Mrs. Glenn A. Plumb. Sponsors of the Commission were named as Hon. Dwight H. Green, Hon. Clayton F. Smith, Hon. Edward J. Kelly, Hon. Robert J. Dunham, and Board of Trustees of the University of Illinois.

A year later, in the first Annual Report of the Commission, it was stated:

"As the Medical Center Commission was brought into being without special provisions for an immediately available operating fund, we found it necessary to appeal to our five legal sponsors for a small sum to carry us through 1942. This was set at \$5,000, and our sponsors were most responsive and prompt in making their respective donations of \$1,000 each. We made our request a modest one, but sufficient for our first year; which we devoted mainly to survey and preliminary planning, and to seeking a clear interpretation of our status under provisions of the law."

### Low Cost Operation

Through administrative and planning help given by the Chicago Plan Commission, the Medical Center Commission was able to accomplish its aim for the year with less than \$100 of this "donation" expended. It was estimated that the expert services thus donated would have cost the Commission \$11,000. The District was thoroughly mapped and competently photographed from the air. A tentative scheme for the redevelopment of the entire District was drafted. And, just as Convalescent Park was divided into projects for clearing, so this broad fundamental plan for the entire District more recently has been divided into more than a score of projects for the same purpose.

The projects go further however than merely clearing land. They focus on specific redevelopment for improved medical care, the removal of old and outworn buildings to make room for housing and other new buildings, gardens and parkways; the expansion of existing institutions and the establishment of new institutions for which the District was created. The hard-won successes have inspired the guiding hands to redoubled effort in pushing ahead with every advantage gained in a steady march toward the goals conceived at the beginning.

During the second year of its existence the Commission continued its policy of strictest economy with a total cash expenditure of \$845.36 out of \$5,000 it had received in donations. The largest of the itemized accounts was \$350 for labor in setting up 1,116 tax data cards. The legislature of that year, 1943, was impressed. The Commission asked for a modest sum to carry on the work that had now become more complex. An appropriation of \$42,000 was voted—and this was more than had been asked. Whereupon the Commission broadened the scope of its operational plans for the forthcoming biennium.

### Organize Staff

The time had come for a full time operating staff. Walter J. Kelly, secretary of the City Planning Advisory Board of the Chicago Plan Commission, who had been intimately identified with the Plan Commission's cooperation in the efforts of the Medical Center Commission even before it had been given legal status as a state agency, was appointed business director and later as executive director, and E. Todd Wheeler, associate architect for the University of Illinois, Chicago professional colleges, was put in charge of planning.

Now the problem of ferreting out land ownership began in earnest with particular concern for those properties that had become tax delinquent. Legal descriptions with ownership and year-by-year delinquencies as of 1940 were compiled on 1,145 parcels of property. This was an astonishing achievement.

It was found in many cases that tax abandoned properties were so deep in arrears that the taxes amounted to more than the property was worth regardless of tax encumbrances. But all this data had to be accumulated to establish an estimate of how much land assembly would cost. Trained investigators were employed and a member of the Chicago Real Estate Board was engaged to make preliminary appraisals and open negotiations for land purchase.

The planning director took over the problems of coordinating the expansion plans of existing institutions and of counseling on the assignments of areas that might seem desirable for proposed new institutions to be located in the District. Studies were initiated to determine the kinds of medical services needed in the District, to give a balanced development, providing for medical care, education and research, and the principle was established that all three of these elements were essential to the growth of the District. All of this planning was designed to conform to the original concepts for the District, establishing the proper physical relationships between institutions, making allowance for space and air around buildings, eliminating unnecessary streets and alleys, and in general proposing an open, park-like character.

### A Strange Irony

By some strange irony of fate, several of the zealous leaders who devoted themselves to establish what they referred to as a "Garden of Health" were struck down by death. Ray McCarthy, who guided the Commission through the



CARL STOCKHOLM  
Commissioner



first three years was stricken July 31, 1945. He was followed in office by Col. A. A. Sprague who served as president until his death, April 6, 1946. Dr. Bernard Fantus, who led the struggle up to the time of the Medical Square Commission, died April 14, 1940. George A. Barr, one of the charter members of the Commission, died January 26, 1945. Dr. Sydney A. Waud, war veteran and member of the Commission, met a tragic death in October, 1946.

At the time of Col. Sprague's death Dean Raymond B. Allen, M.D., of the University of Illinois, who had been serving the Commission as vice-president, stepped into the president's chair. A year later he was called to the presidency of the University of Washington. He was succeeded by Walter H. Theobald, M.D., who had long been active among the leaders to bring the Commission into being. Dr. Theobald has been a member of the Medical Center Commission from its beginning. As the executive head of the Commission his term has been one of constant achievement.

### Current Developments

JOHN THOMPSON, the famous war correspondent, in a comprehensive article concerning the Medical Center District published in the Chicago Tribune November 15, 1947, had this to say about how the Commission had progressed with its plans:

"Today the dream is emerging, step by step, from the blue prints of the Medical Center Commission, headed by Dr. Walter H. Theobald, president. Large tracts have been set aside for actual development as medical schools, hospitals, or for similar usage, and the Commission has spent more than a million dollars of state funds in the laborious task of acquiring land.

"Land acquisition is only part of the story. In purchasing 135 parcels of real estate, the Commission acquired 145 residential buildings, including 515 of the 5,000 dwelling units in the entire blighted area of the Medical District.

"And it is here, in the rehabilitation of buildings almost ruined by generations of neglect, that visual progress of the dream can be seen."

The article then explains how the Commission utilizes old buildings that would be razed but for the housing shortage. Simple repairs are made by the Commission. The residence units are rented to students and doctors at rates ranging from \$12 to \$20 a month. The renters then make the homes attractive at their own expense, sometimes charging the costs against the higher rents they had expected to pay for living quarters.

During the past year the Commission has obligated itself to purchase a site for the \$2,000,000 home of the Chicago Medical Society, another eight-acre site for the new Loyola University Medical and Dental schools and a ten-acre site for the Illinois Tuberculosis Sanitarium. The last legislature appropriated \$2,550,000 for the purchase of land. This amount supplemented the \$1,100,000 previously appropriated for this purpose.

In addition to the above projects in work a site has been reserved for the Veterans Administration hospital. It covers 13½ acres and the land will be purchased directly by the V. A.

Preliminary plans for these future developments will appear in a report now in preparation for publication.

### Medical Center Summary

**MEDICAL CENTER DISTRICT.** An area consisting of 305 acres, or 70 city blocks, located on Chicago's west side between Ashland and Oakley Boulevards, Congress Street and Roosevelt Road. Boundaries were established by the Illinois State Legislature with the intent that the District be completely converted to the use of medical institutions, specifically including hospitals and teaching institutions. The District also is to include homes for personnel employed by these institutions, living quarters for students.

**MEDICAL CENTER COMMISSION,** 736 S. Ashland Boulevard. A state agency created by the Illinois State Legislature in 1941 to carry out the provisions of the Medical Center District Act. The Commission consists of seven members, four of whom are appointed by the governor, and one each by the president of the Board of Cook County Commissioners, mayor of Chicago, and the president of the Chicago Park District Board.

**MEMBERS OF THE COMMISSION.** Walter H. Theobald, M. D., president; Lester J. Norris, vice-president; Albert D. Farwell, treasurer; David H. Brill, secretary; C. Hilding Anderson, Carl Stockholm and Walter A. Wade.

**FUNCTIONS OF THE COMMISSION.** To administer the provisions of the Medical Center District Act by planning and coordinating the general activities of the redevelopment of the District; to assemble land from private owners other than properties that are institutionally owned; to buy either through negotiation or by condemnation through right of eminent domain; to provide counsel and ad-

vice leading to harmonious design in general building operations; to initiate action for closing certain streets and alleys not required in the redevelopment; to transfer acquired lands to District institutions by sale or lease; to survey and negotiate for prospective institutions to be located in the District; to lay out project plans for the various sections of the District allocating certain projects to appropriate areas; to create parks and parking spaces; to encourage the development of housing and other community services, and to carry out in general the provisions of the Medical Center District Act.

## SERVICES OF THE DISTRICT

Practically every ailment known to human-kind may be found in the hospitals located in the Medical Center District. At the patient's bedside may be found physicians or surgeons who top the list of the world's most noted in medical science. Here, too, among the students in training, are the future great of medical men, studying the techniques of the masters.

There are more than 800 doctors in daily attendance in the hospitals of the Medical Center District. Among the seven schools located here are close to 3,500 students who, for the time being, are inadequately housed due to a lack of institutional dormitories. One of the incidental services of the Medical Center Commission is to assist, wherever possible, in providing temporary quarters for students and teachers

(Continued on page 38)



WALTER A. WADE  
Commissioner



# UNIVERSITY OF ILLINOIS

*Professional Colleges of Medicine, Dentistry and Pharmacy*

*... University of Illinois Hospitals ... 1,500 students and a teaching staff of 900 on the Chicago Campus.*

**A**MONG the great universities for teaching of the health sciences the University of Illinois stands near the top. Its professional colleges include medicine, dentistry and pharmacy. Located in the Medical Center District of Chicago they function in a framework of related institutions, both public and private, that scarcely can be excelled. Close relations exist with the State Department of Public Welfare, State Department of Public Health, the Cook County Hospital, and the Presbyterian Hospital.

A pleasing development in the District is the landscaped block bounded by Polk, Wood and Taylor Streets and Wolcott Avenue. This site, once known to sports fame as the former Cubs ball park, is today the campus for the medical, dental and pharmacy colleges of the University of Illinois. It covers 427,492 square feet—approximately ten acres. Here, too, are located the University of Illinois hospitals. Other properties in the District owned by the University bring the total holdings to 608,071 square feet. Cost of land used jointly by the University and the Department of Public Welfare was \$641,000. The University investment amounted to \$579,125. The buildings are comparatively new, the first construction having started in 1923. Total cost of these buildings to date (1947), including \$1,684,000 by the Department of Public Welfare, is \$9,093,000.

## Thorne and James

Back of this remarkable development was the genius and force of two outstanding state administrators of a generation ago. One was Edmund K. James, president of the University of Illinois. The other was Charles H. Thorne, state director of the Department of Public Welfare. These two forward-minded, public-spirited officials pooled their respective resources wherever possible to solve an accumulation of problems that were held in common.

Thorne took office in 1917, at the beginning of the first World War. The orderly progress of development in the Welfare department was largely sidetracked for the emergency war effort. Extraordinary demands were made on the state institutions. Hospitals were overcrowded. There was a shortage of man power—especially for the professional personnel—doctors and nurses.

Thorne took his responsibilities deeply to heart. He felt the state should do more for those who needed physical and mental care and he discussed his views with President James of the University. After the war his facilities were taxed more than ever by the effects of the war on the people of the state. On one occasion he had this to say:

“Upon entering this service in 1917 . . . the thing that impressed me most was the fact that the state was giving custodial care and incidental treatment to terminal cases and was not doing anything worth while along the line of research, and had no ideas apparent upon the subject of preventive treatment.”

Waxing warm on the subject he concluded, “Why hasn’t the state conducted research for humans the same as it has for hogs? I think the answer is that research on hogs has been conducted by the University whereas research on humans has been attempted by an administrative department which is not fitted to do so.”

## Cooperative Agreement

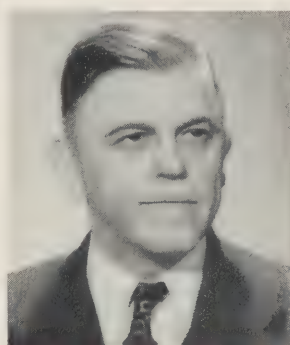
Out of this philosophy in which Dr. James seemed to be in full accord there were drawn up cooperative working agreements advantageous both to the University and the Department of Public Welfare.

A formal arrangement was agreed upon and signed by both agencies on July 5, 1919. These were the general objectives in which they concurred: “To construct and maintain a group of hospitals and institutes in the medical center of Chicago; to provide medical treatment for the indigent sick of the state; to give medical education and training to students; to help practicing physicians of the state to keep in touch with the latest and best methods of preventing and curing disease; to tell the people of the state how to keep themselves physically fit; to discover and check at their sources the supply of human wreckage over-flowing hospitals, asylums and prisons of the state.”

On the site of the old Cubs baseball park, south of the County Hospital, the first of the group buildings were erected—the first units of the University of Illinois Hospitals. It was a joint enterprise between the University and the Department of Public Welfare. Dedication ceremonies were held on March 6, 1924.

Thorne derived great satisfaction as he watched the progress of his long cherished dream of a “great medical center.” An abstract of his statement reads:

“The new hospital, located in the great medical and hospital center on the west side of Chicago, will be within easy reach of cases of special interest to the scientific men, who will be engaged in this research work. Its staff will be composed of men selected by the faculty of the College of Medicine of the University of Illinois for their special training and fitness for their work. It will also afford an opportunity for scientific men in the service of the Department (of Public Welfare) to observe and take part in the scientific work that shall come within the scope of this great institution.”



DR. ANDREW C. IVY  
Vice President



Other units conforming to the basic architectural plan "grew up" on this ten-acre square in the years that followed. Included are the Dental, Medical and Pharmacy Building, 1853 W. Polk St.; Illinois Surgical Institute for Children, 905 S. Wolcott St.; the Nurses' Home; Illinois Neuropsychiatric Institute, 912 S. Wood St., and the Institute for Juvenile Research, 907 S. Wolcott St. The latter two are owned by the State Department of Public Welfare and staffed by the University.

Details of these various units concerning their history and resources are treated under individual headings.

### Administration

ALL the facilities of the University of Illinois on the campus of the Medical Center District report to Dr. Andrew C. Ivy, vice-president of the University. Dr. Ivy reports to George D. Stoddard, Ph.D., president, at the University of Illinois in Urbana.

Members of the Board of Trustees, who control the policies of the University, are elected by the voters of Illinois. Those elected for terms 1943-49 are Chester R. Davis, 69 W. Washington St., Chicago; Dr. Martin G. Luken, 1448 Lake Shore Drive, Chicago; Frank H. McKelvey, 1023 Woodland Ave., Springfield. Members elected for the terms 1945-51 are Dr. Karl A. Meyer, Cook County Hospital; Kenney E. Williamson, 606 Lehman Bldg., Peoria; Walter H. McLaughlin, 420 S. Franklin St., Decatur. Members elected for 1947-53 are John R. Fornof, 122 S. Bloomington St., Streator; Mrs. Doris Simpson Holt, Flora; Park Livingston, 20 N. Wacker Drive, Chicago. Mr. Livingston serves as president of the board.

The administrator of the hospitals is appointed by the Board of Trustees upon recommendations of the vice-president. John E. Millizen is chief administrator.

Dr. Ivy is recognized as one of the very top American

physiologists as well as one of the most prominent clinical investigators. He has conducted extensive research on problems dealing with the gastro-intestinal tract, gall bladder, and brain and glands of the internal section.

During the war he served as director of the Naval Medical Research Institute at Bethesda, Md. He later served as the United States representative on an international commission to advise the Nuernberg judges on the human experiments conducted by Nazi physicians. More recently he was named executive director of the National Advisory Cancer Council.

Among the number of large scale research projects initiated by Dr. Ivy are those that deal with diseases with which our people are most commonly afflicted. He was quoted as saying, "From both the economic and humanitarian viewpoints it appears to be ill-advised to build more and more sanitariums and hospitals for the care of the ill, and at the same time to devote practically nothing to research, or to the study of how to prevent and better manage diseases."

In compliance with that research policy, Dr. Ivy has formulated plans for a new \$18,000,000 building program in the Medical Center District which he hopes to start in 1949, pending a grant by the state legislature. The program includes a research institute for chronic illness and geriatrics which would be constructed at a cost of \$2,500,000. This institute would provide facilities in which arthritis, high blood pressure, and hardening of the arteries can be studied systematically and intelligently.

Another item on the program is a hospital for cancer research, treatment and detection at a cost of \$3,800,000. Other projects include the construction of an experimental research building to cost \$500,000; a drug plant research station, \$235,000; a nurses' residence, \$1,415,000; student residence halls, \$1,050,000; a power plant and utilities distribution system to cost \$3,100,000.



All is immaculate for a surgical operation.





*On the site of the old Cubs ball park has arisen this magnificent group of buildings of the University of Illinois. It includes the Colleges of Medicine, Dentistry and Pharmacy. This photo shows only the Polk street side and the corner of Wood street. The site covers approximately 10 acres. Expansion of the Chicago campus is now under way.*

## College of Medicine

Professional schools do not obtain their prestige overnight. They achieve stature by a process of growth. While the College of Medicine of the University of Illinois has been known by that name only since 1913 it has, as matter of fact, attained both prestige and great stature over a period of unabated progress extending back to 1881 with the founding of the College of Physicians and Surgeons of Chicago.

It was the College of Physicians and Surgeons which evolved into a university status as it became integrated with the University of Illinois. The affiliation began in 1897 but the name was not changed until 16 years later.

Another great name in medical history now merged into University of Illinois College of Medicine is the Rush Medical College—the pioneer of all mid-western medical schools. This merger took place in 1941. Rush Medical College was founded by Dr. Daniel Brainard who came to Chicago as a young doctor in 1834. The charter for Rush was granted by the Illinois state legislature in 1836-37, within a few days of the date when Chicago itself was granted its charter as a city by the same legislative assembly.

Therefore the roots for the Illinois College of Medicine go back for more than a century. An interesting side-light to this history is the fact that Dr. Brainard named the college for Dr. Benjamin Rush whom the late Dr. Bevan described as “a great physician, a noble patriot, and a signer of the Declaration of Independence.” Other reference will be made to Rush in connection with the section on the Presbyterian Hospital.

## Staff—900 Physicians

The University's College of Medicine, staffed by 900 physicians, is one of the largest medical schools in the United States in enrollment.

Dr. Ivy's outstanding record as a research specialist has given the college extraordinary impetus in this direction. Practically all of the teaching staff is working on one or another research problem. Many of the findings are particularly noteworthy.

In a study on convalescence, Dr. Warren H. Cole and Dr. Robert W. Keeton have determined that it is possible to eliminate insufficiencies arising from operations by new and various forms of treatment. They have conducted studies on the rate of convalescence and the factors that control the recovery processes, and performed tests on patients to determine what organs were affected by operations. They are now conducting tests to determine the speed of convalescence. The department of surgery of which Dr. Cole is the head also has developed a new method of treatment for strictures of the common bile duct.

## Notable Contributions

A series of important contributions to the study of experimental renal hypertension has resulted from the work of Dr. G. E. Wakerlin, head of the department of physiology. Dr. Wakerlin is currently conducting research on the prevention and treatment of experimental hypertension as a promising approach to the increasingly important problems of cardiovascular disease in man.



Through public lectures by staff members, the College of Medicine has extended its influence for better public health beyond the borders of the campus. One recent contribution in this direction was the placing of an exhibit in the Museum of Science and Industry called "The Miracle of Growth". The exhibit dramatically presents the growth of the individual from conception through adulthood.

The College of Medicine is directed by Dr. John B. Youmans who reports to the vice-president of the University, in charge of the three professional colleges and the affiliated hospitals. The departments within the college are classed as Basic Sciences, Clinical, and Auxiliary. The Basic Sciences include Bacteriology and Public Health, Biological Chemistry, Physiology, Anatomy, Pharmacology and Therapeutics, and Pathology. The Clinical Departments cover Medicine, Surgery, Pediatrics, Obstetrics and Gynecology, Neuro-surgery, Orthopaedics and Psychiatry. The Auxiliary Departments deal with Physical Medicine, Anaesthesia, Radiology, Animal Hospital and Medical Illustration Studies.

There are a total of 829 students in the College of Medicine (1947) of whom 634 are undergraduates. Occupational Therapy, a course that was adopted in 1943, has 24 students.

Requirements for admission to the College of Medicine include the completion of three years of undergraduate study in an approved college or university taking certain specified courses. During this time, the student must complete an average of 85 per cent or higher. Admission then depends on an interview by the Faculty Committee on Admissions which takes into account all factors which in its judgment indicate the applicant would make a good doctor.

In general, the student spends his first two years on academic subjects receiving classroom and laboratory instruction. This instruction leads up to the later clinical studies. During the first year, he studies Anatomy-Histology, Embryology, Biological Chemistry, Physiology and Psychiatry. The second year he takes up Bacteriology, Hygiene, Medicine, General Pathology, Clinical Pathology, Pharmacology, Physiology, Physical Diagnosis, Psychiatry and Surgery.

### First Clinical Experience

His clinical experience comes during the third and fourth year. He now is prepared to come to the patient's bedside and receive instruction in the open clinic. The teaching is directed to small groups by the attending staff as well as by internes and residents. The student sees in performance all the techniques he is studying. In the fourth year he may be assigned to a clerkship, which is something like a sub-internship. He is required to spend full day time on a given service. But, unlike the interne, he is not on that service 24 hours a day. Nor is he responsible for the patient's welfare. However, he does concentrate for a period of several weeks on each service while in his clerkship.

The clinical subjects include Topographic Anatomy, Anaesthesia, Autopsies and Pathology, Criminology and Psychiatry, Dermatology, Gynecology (including obstetrics), Hygiene and Public Health, Jurisprudence, Laryngology—Rhino-logy, and Otol-ogy—Medical Sociology, Medicine (including Tropical Medicine), Obstetrics, Ophthalmology, Orthopaedics, Pediatrics, Radiology, Stomatology, Surgery, Therapeutics, and Urology.

At the end of the fourth year, and upon recommendation by the staff, the student receives a diploma. He is then qualified to serve as interne in a hospital for a year. During this period he spends full time on the job and generally is assigned to several services in rotation including at least the

principal services of medicine, surgery, pediatrics and obstetrics with possible short assignments to some of the specialties.

After he has completed his internship he is then qualified to enter general practice or may elect to take graduate work which involves two or three additional years of hospital service as a resident in one of the specialties. Following this he may take the Specialty Board Examination and be certified for practice in that specialty.

### College of Dentistry

**I**N EARLY days, the College of Dentistry shared a measure of the vicissitudes that plagued the beginnings of the College of Medicine. This was derived from the fact that in the beginning it was organized as a department of the College of Medicine.

Difficulties arose over the fact that the corporation of the College of Physicians and Surgeons refused to renew a lease of its properties to the University during a crisis in 1912. At the time the University was operating the college with facilities owned by the corporation. For a few months there was a clean break between the State and the privately owned institution. The alumni and faculty campaigned to buy the property shares and these were donated to the University.

From that time on the College of Dentistry functioned smoothly as a separate unit of the University's professional colleges. But the real beginning was even earlier with the old Columbian Dental College which was founded in 1892. Six years later the name was changed to the Illinois School of Dentistry.

Committees representing the two institutions entered into negotiations in 1900-01 and conditions were agreed upon by which the University would take over the school with its faculty of 16 of which Dr. A. H. Peck was the head. Dr. Peck was a graduate of the Chicago College of Dental Surgery, 1888, and of Rush Medical College, 1891. He was retained as dean of the School of Dentistry. It occupied four floors of the old College of Medicine, then located at Harrison and Honore Streets.

### First University Class

The first class was graduated with University of Illinois degrees in 1902. There were 40 graduates. Three years later, April 27, 1905, the name was changed from School of Dentistry to College of Dentistry. As a result of the later disruption the original charter was sold in 1912 to the Chicago College of Dental Surgery. There was no graduating class in 1913 but that year the College of Dentistry started out with a new lease on life as an organic part of the University of Illinois.

Entrance requirements for admission to the College of Dentistry have stiffened considerably since the early days now that it is under University direction. At the beginning an applicant had merely to show that he was certified to enter second year high school. Today the prospective student must show completion of two years of pre-dental work at an approved college or university. Admission then is contingent on an interview by the Faculty Committee on Admissions. The student must have a grade average of 3.5.

The College of Dentistry is now located in the same building as the Colleges of Medicine and Pharmacy, using many of the same laboratories, classrooms, library, and to a large degree the same pre-clinical faculty. In 1939 all three colleges were placed under an executive dean, and in 1946 that office was changed to the University vice-president.

(Continued on page 40)



# UNIVERSITY OF ILLINOIS HOSPITALS

*RESOURCES—510 hospital beds for service, education and research . . . Out-patient clinic receives up to 150,000 patient visits in year.*

**I**T WAS in the hospital section that the University of Illinois found the cooperation of the Illinois Department of Public Welfare especially helpful.

Cook County Hospital serves on a big scale the general clinical teaching source for medical schools in the Medical Center District, and to some degree other medical schools in the Chicago area. It moves in its own magnificent orbit. It does not choose its patients for the educational aspects of the case. It must take them, one and all, as they come and give them the medical service required. Clinical teaching is incidental.

For that and other reasons the trustees of the University of Illinois considered it imperative that its professional colleges should have their own hospitals with selected cases for clinical teaching and research. Obtaining funds for such an undertaking seemed to offer insuperable difficulties. Money for operating the University is supplied by the people of Illinois. Revenues must be carefully apportioned among many state agencies. One of these agencies is the Department of Public Welfare.

Charles H. Thorne, state director of the Department of Public Welfare (1917-21), found the state hospitals overflowing with patients when he came into office. Why? he wanted to know. He said, "It seems obvious that any activity, whether state or private, which spends one-fifth of its revenue upon a single thing, should know something about that thing, and should spend a considerable sum for the purpose of ascertaining causes, with the idea of reducing costs."

The shrewd thinking of this executive head of a highly organized Chicago business institution brought about a signed agreement between the Public Welfare Department and the University of Illinois which resulted in the University of Illinois Hospitals as they are today. It was not entirely a 50-50 arrangement for everything, but this assistance covered a broad field for the University in its hospital developments.

## General Hospital

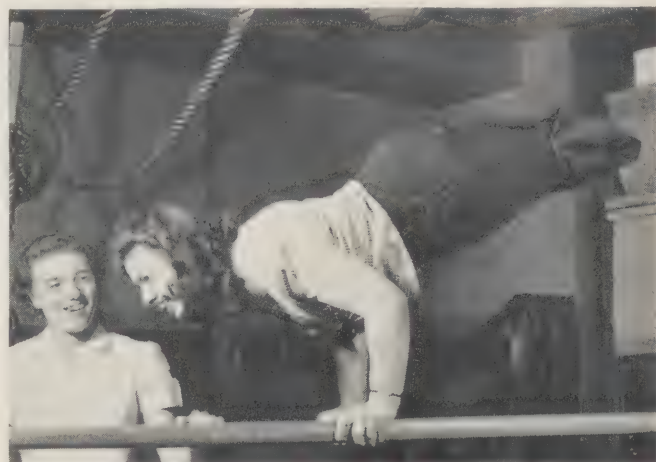
One of the first units to come under the cooperative plan of the University and the Department of Public Welfare was the General Hospital, one of the group of hospitals that came to be known as the Research and Educational Hospitals of the University of Illinois. This name was changed in October, 1947, to University of Illinois Hospitals.

It was planned to provide for hospital care for citizens of the state who were financially unable to assume the costs of such attention. It was not presumed that all citizens worthy of such service could be thus accommodated so it was agreed that only those cases would be admitted which could be of value to the highly skilled staff in teaching the techniques and methods to future doctors attending the professional schools.

The plan to build such a hospital was first brought to the attention of the state legislature by the Department of Public Welfare in 1922 through the annual report issued that year.

The legislature had provided \$300,000 with which the University should operate such a hospital. The Department now proposed to buy the land and build.

These plans met the approval of all concerned. Construction got under way. The General Hospital was dedicated March 6, 1924. The agreement stipulated, "Its staff will be composed of men selected by the faculty of the College of Medicine . . . for their special training and fitness for the work. It also will afford opportunity for scientific men in the service of the Department to observe and to take part in the scientific work that shall come within the scope of this great institution."



Physical Therapy is an important part of the healing sciences

## Ownership Transferred

For 17 years the General Hospital was owned and operated by the Department of Public Welfare and staffed by the University of Illinois as its teaching and research hospital. Then, on July 1, 1941, by action of the General Assembly, ownership of this hospital, along with the Surgical Institute for Children, was transferred to the University of Illinois and both are now owned, operated and staffed by the University.

The General Hospital has a capacity of 240 beds. The administrator of the hospital is responsible to the vice-president of the Chicago Professional Colleges and allied institutes.

Outpatient clinics are provided for Admitting, Medical, Pediatrics, Obstetrics, Physical Diagnosis (arthritic, cardiac and metabolic), Allergy, Dermatology and Syphilology, Surgery, Gynecology, Tumor, Otorhinolaryngology (ear, nose and throat), Ophthalmology (eye), and Urology.

The major bed services are for Medicine, Surgery, Pediatrics, Obstetrics and Gynecology. Specialties include—Adult Orthopedics, Oral Surgery, Genito-Urinary Surgery, Ophthalmology, Otorhinolaryngology, Atmospheric Research, Child Research Clinic. The auxiliary services include—



Hospital Laboratory, Electrocardiology, Radiology, Physical Medicine, Anesthesiology, Dental Service, Hospital Pharmacy, Nursing, Dietary, Social Service, and Medical Records.

There are 580 persons in the academic division including a number of full time staff employed in the General Hospital. In the non-academic division are a total of 166 including those in the Administration, Dietary, Nurses' Quarters, Medical Records, Patients' Library, Medical Social Service, X-ray and Radium, Clinical Laboratories, Operating and Delivery, Other Professional Services, and General Outpatient Service. There are 150 full time, and 47 volunteer nurses. Also included in personnel are 166 medical clerks, 15 internes and 27 student nurses.

All services rendered are free except for nominal registration fees.

### **Illinois Surgical Institute for Children**

That there was a very definite need for special facilities to provide hospital care for the children of the state was recognized as far back as 1911. An act was passed at that time authorizing the establishment of an Illinois Surgical Institute for Children. The hospital was to be one of the several hospitals operated by the Department of Public Welfare.

It seemed like a very worthy idea and if the Department wanted to build such a hospital it would be a very fine thing to do. But the state appropriated no funds with which to do it. The Department filed the proposal for future consideration.

This happened, of course, before Charles H. Thorne became director of the Department, and before the cooperative arrangement was worked out with the University of Illinois. During the Twenties the University and the Department made good progress in establishing research hospitals on the University campus in Chicago. By 1930 the University announced that it had a building suitable for the long-delayed Illinois Surgical Institute for Children. It was just a building, no beds or other equipment for such an Institute.

This situation aroused considerable public interest. The Elks and the Rotarians passed the hat. The response was heartening. Through this humanitarian effort sufficient funds were raised to set up eight beds and 15 cribs in the building and the Illinois Surgical Institute for Children became a working model. Aroused by this popular approval the legislature at its next session (1931) appropriated \$180,000 to make the Institute a going concern.

### **Clinic and Service**

The hospital was staffed by members of the faculty of the College of Medicine. Being an educational institute, patients are accepted in the hospital primarily as their specific cases are of value for teaching and study. The bed provisions were expanded to a total of 120. Therefore the scope of this service as compared to the 240 beds in the General Hospital places it more on the plane of a service institution than merely one for teaching and study. However, all patients in the Institute are on a clinical basis for study and teaching.

A brace shop was opened as a department of the Institute in 1932. The braces are provided for deserving child patients who have deformities, and are used during convalescence or pending the time they are in condition to be given surgical treatment.

In 1941 the General Assembly transferred the Institute to the University of Illinois, which now assumes ownership and operation, including staff attendance.

The Institute is located at 905 S. Wolcott Ave. The building is five stories and basement, and cost \$640,000.

Departments of the Institute include Children's Orthopedics, Adult Orthopedics, Outpatient Orthopedics, Brace Shop, and Dental Service. Personnel assigned to the Institute totals 190.

It will be noted that "Adult Orthopedics" is listed for this children's hospital. The significance of this item lies in the fact that the Illinois Surgical Institute serves the entire state for orthopedic treatment and is the only state hospital fully equipped for such service. Only a small part of its service, however, goes to adults.



Examination time in the Illinois Surgical Institute for Children



# Diagnostic, Biological and Research Laboratories

*Examination of more than a half million specimens annually, large scale production of vaccines and serums, and research projects constitute the work of this institution.*

IT WAS in 1937 that the Division of Diagnostic, Biological and Research Laboratories of the Illinois State Department of Public Health took over the long two-story and basement building of the Jewish Charities at 1800 W. Fillmore St.



DR. H. J. SHAUGHNESSY  
Chief, Division of Laboratories,  
State of Illinois Department of Health

Fortunately for the future war effort the DBR Laboratories were well established with equipment and working facilities when the deluge came in 1941. The laboratories were immediately called upon for the maximum of service to carry through research activities to find serums and antidotes for the benefit of our armed forces in all parts of the world.

Some of the activities along this line are apparent in the Annual Report of Dr. H. J. Shaughnessy, Ph.D., chief of the Division, for 1941-42.

"Increased collaboration with the Army, Navy and other Federal organizations was the most important feature of the work of this Division," the report states. "A new high level was reached in the number of serological specimens examined at the six diagnostic laboratories of the Division, primarily because of the greater specimen volume received from draft board and other recruiting agencies.

"Also related to the war effort was the contribution of this Division to the planning and execution of the Plasma Program in this state. This called for the production of approximately 4,000 units of plasma, each containing 250 cc. of the fluid."

## Reserve Stock

In June, 1942 the Biological laboratories began building up reserves of each product to meet any emergency demand. It was a timely enterprise in that wide-spread flood conditions threatened an epidemic of typhoid in the spring of 1943. Approximately 120,000 cc. of typhoid vaccine and 80,000 cc. of triple typhoid vaccine were dispatched to the flooded areas.

Throughout all the war the Laboratories continued their routine diagnostic examinations for the State Department of Health but like the persistent theme in a musical composition there continued a persistent continuity of research. The Laboratories cooperated with the National Foundation for Infantile Paralysis in determining the role of carriers in the transmission of poliomyelitis and the duration of the carrier state in that disease. They cooperated with the Department of Medicine of Northwestern University in a study of kidney

extracts on hypertension (high blood pressure). They cooperated with the Samuel Deutsch Serum Center of Michael Reese Hospital for the production of improved vaccines of several types.

Increasing demand for services of the Laboratories has been made since the close of the war in connection with the diagnosis of parasitic and mycotic infections.

This institution, one of five laboratories maintained by the Illinois Department of Public Health, receives and examines more than half a million specimens annually. Most of these are sent to the Laboratories by physicians and health officers, but dentists, veterinarians and others also supply materials for examination. The range of specimens encompasses those from suspected cases of communicable diseases to water and milk being examined routinely for conformance with accepted standards. In recent years laboratory diagnosis of virus diseases has been given emphasis, this institution being one of the few in the country to undertake such tests.

By the middle of 1946 Dr. Shaughnessy was ready to report that, "The State Laboratories have been working on a serum treatment of virus diseases, with particular emphasis on the virus encephalitides. Until recent years virus diseases were considered beyond treatment once the symptoms had appeared. Now serum treatment of measles, one of the virus diseases, is an accepted procedure and the treatment of virus encephalitis, developed by the State Laboratories, has produced very satisfactory results in laboratory animals. The use of the serum is especially effective as a means of possible protection against cases during epidemics.

Following are some of the interesting details contained in the State Laboratories report:



State of Illinois Department of Health



## Typhoid Carriers

"The S. L. has been carrying on research in detecting typhoid carriers. There is always a considerable number of people normally walking about in the community who carry the disease germs about with them and are likely to infect others who do not possess a natural immunity. Such people must observe special precautions for the safety of their families and the community at large. At present about 450 such carriers have entered into a formal control agreement with the State Department of Public Health. It is of utmost public interest to detect other carriers in the State who have not yet come under organized supervision. Therefore, research on the newer methods of examining stool, which have proven much more effective than the old method of inserting a tube to test the bile, has resulted in a significant step toward protecting the community.

"Other research is being carried forward on the preparation of vaccines with the use of ultra-violet rays. This has resulted in a number of interesting pieces of work. The vaccines have proven successful in the prevention of dysentery in animals but unfortunately the same vaccines were ineffective in man. The rabies vaccine produced by ultra-violet irradiation has worked out very successfully, and the work of the S. L. has been published in Government bulletins, industrial organs and elsewhere.

"Through recent research the S. L. has also developed a far more humane method of treating rabies wounds than had been employed heretofore. Instead of the former almost barbaric use of fuming nitric acid to cauterize the open wound, the new method flushes out the wound thoroughly with a synthetic detergent which is both gentle-acting and highly effective as an antiseptic. The new method has been widely accepted throughout this country and elsewhere.

## Diphtheria Survey

"In its field research the S. L. recently uncovered an especially virulent type of diphtheria which apparently had been brought in from overseas by returning soldiers. This was done in the course of a special diphtheria survey which is part of the S. L. research program.

"There are a number of very important research projects which the S. L. is interested in carrying forward, if the funds and personnel required for research are forthcoming. For example, much study is required on the actual sterilizing value of ultra-violet rays. This problem came to the fore in the course of recent routine maternity hospital inspections which led to the strong suspicion that at least three infant deaths that have occurred lately could be traced to an overreliance upon ultra-violet sterilization."

The Division of Diagnostic, Biological and Research Laboratories, a Division of the Illinois Department of Public Health operates and maintains the building. The Division of Industrial Hygiene and the Division of Sanitary Engineering maintain offices and other facilities in the building. Dr. H. J. Shaughnessy, is chief of the Division of Diagnostic, Biological and Research Laboratories. Roland R. Cross, M.D., is Director of Public Health, State of Illinois.

Personnel for the Divisions total 109, and are as follows: Diagnostic, Biological and Research Laboratories 90; Industrial Hygiene 16; Sanitary Engineering 3.

Some teaching is carried on at the graduate level in collaboration with the Department of Bacteriology and Public Health of the University of Illinois College of Medicine.

## ILLINOIS STATE

# DEPARTMENT OF PUBLIC WELFARE

## Illinois Neuropsychiatric Institute

*Owned and operated by the State Welfare Department, staffed by the University of Illinois, this modern institution is performing valuable service for a great need.*

WORKING jointly with the University of Illinois, the State Department of Public Welfare has been one of the most active factors in the modern development of the Medical Center District. It made possible the start of the University's Chicago Professional Colleges and the affiliated hospitals.

Some of the institutional enterprises it helped to finance in the beginning have since become the sole responsibility of the University. Others are staffed by doctors representing the University. One of the most notable institutions owned by the Department in the District is the Neuropsychiatric Institute.



DR. HARRY R. HOFFMAN  
State Alienist

## Illinois Neuropsychiatric Institute

*(The following account of the functions and services of the Neuropsychiatric Institute was prepared by Dr. Harry R. Hoffman, executive director of the Institute.)*

The Neuropsychiatric Institute, of which the state alienist, Dr. Harry R. Hoffman, is executive officer, structurally is a building with two separate wings, a north one, nine stories tall, housing the neurologic and neuro-surgical services under the direction of Dr. Eric Oldberg; and a south wing, also nine stories tall, housing the department of psychiatry under the supervision of Dr. Francis Gerty. The psychiatric division has been organized about three main purposes. (1) To provide adequate teaching, both to the students of the University of Illinois and in post-graduate courses to the staff of physicians of the state hospital system. (2) For research work. (3) For the care and treatment of patients.

It can be readily seen from these purposes that the Neuropsychiatric Institute functions primarily in the advancement of our knowledge in psychiatry rather than as a service to patients toward this end. There is a maximum capacity in this nine-story building of 86 adult patients and 14 children. This capacity is purposely limited, for it is felt that comprehensive work cannot be done with a large number of patients.

**Teaching.** Teaching of medical students is done not only in the lecture rooms but on the wards and in the dispensary. Our staff, into which inroads were made by the demands of the army, have arranged a rather comprehensive program.



Students are taught from their very first year through the internship and one of the primary purposes of the teaching is to instill in the students the concept that man is a total organism and that man's personality responses are dependent upon many physiological, psychological and sociological factors.

Post-graduate courses are offered to state hospital physicians as in former years. The alienist's office arranges for sufficient physicians from each of the state hospitals to attend the Institute. The courses are planned to give a comprehensive survey of the new developments in the field of psychiatry and newer concepts into the cause as well as the treatment of mental diseases.

There is a training school for cadet and affiliate psychiatric nurses housed here in the Neuropsychiatric Institute, under the direction of Marion Kalkman.

**Research.** The research is divided into two types. The clinical research program centers about the observation of patients and the reaction to various therapeutic procedures. In this clinical research organization new treatments are constantly devised and experienced. The primary purpose of this research work is to furnish a solid foundation for treatments which may be used in the state hospitals. When one considers that there are approximately 46,000 patients now in our state institutions one can readily see the importance of any method of therapy which will result in improvement or cure of the patients.

The second portion of the research program is primarily centered in the laboratories, and is headed by Dr. Warren McCulloch, formerly of Yale University. The laboratory, which is housed in a modern air-conditioned, specially designed basement, has facilities for every type of research work. While all the latest technical devices have been in-

stalled, the most important elements of the research laboratories are here, as they always have been, in the research workers. Ideas, after all, spring from men and while the mechanical tools are of invaluable assistance, only when trained and skilled persons operate these tools can mankind be benefitted. Our research laboratory, headed as it is by such an outstanding man as Dr. Warren McCulloch, has at its call consultants from every branch of the University of Illinois hospitals and the integrated knowledge of these men functions well in the advance of science.

**Services to Patients.** Needless to say, patients who are admitted to research will receive the utmost in care. Our chief nurse, Miss Marion Kalkman, who came from Ann Arbor, is very efficient in arranging for the personal comfort of the patients. Because of the primary purpose of the Institute, however, these patients will remain in the hospital only as long as they are of value, either in teaching or in research. Patients stay only a relatively short period of time and the more chronic cases are transferred to state institutions. The great number of cures which the Psychiatric Institute has obtained has provided the hospital with an ever-increasing waiting list, which unfortunately both because of financial and staff limits cannot be taken care of as adequately as possible. However, the information obtained from these patients is of inestimable value to the entire state hospital system.

The State Department of Public Welfare has done everything possible to provide adequate physical facilities for the advancement of our knowledge in neurology and psychiatry. It now undertakes to provide adequate maintenance and as brilliant a staff as can be found so that the physical tools can be used most efficiently.

### **Institute for Juvenile Research**

Long before there was a Juvenile Court and a Juvenile Detention Home the records show that Chicago women took a motherly interest in the forgotten and neglected children of the city. As far back as 1883 members of the Chicago Woman's Club began to look after the little strays who got into trouble and into jails.

In 1909—a decade after the Juvenile Court was established—Mrs. W. F. Dummer, one of those public spirited women, founded what has since become known as the Institute for Juvenile Research. This is believed to be the first child guidance clinic in the United States to deal exclusively with the personality and behavior disorders of children. Through the beneficence of Mrs. Dummer it originally functioned as a phase of the Juvenile Court. Later it was taken over by the Illinois Department of Public Welfare which today maintains it in cooperation with the University of Illinois.

Prior to the establishment of this Institute interest had centered largely on the care and treatment of physically handicapped and mentally retarded children. The purpose of the Institute, then known as the Juvenile Psychopathic Institute, was to study scientifically some of the children brought before the Juvenile Court to determine the cause of their aberrant behavior and to attempt the development of new methods for their correction and adjustment.

Dr. William Healy, now with the Judge Baker Foundation Clinic, was the first director and served until 1917. The clinic was formally taken over by the Cook County Administration in 1914 as an adjunct of the Juvenile Court. It became a state agency in 1917 under the leadership of Dr. Herman M. Adler. Under this new regime the name was

*(Continued on page 39)*



**Neuropsychiatric Institute**





# COOK COUNTY HOSPITAL

*A CENTURY has passed since the first Cook County Hospital was established. It is today the largest civilian hospital in the world, and it stands as a landmark in the progress of medical science and healing. One out of every four of the 110,000 practicing physicians in the United States has received part of his training here.*

**P**ROBABLY no hospital in the United States is better known to the medical profession than the Cook County Hospital in Chicago. A statement recently published claims that one out of every four of the 110,000 doctors in practice throughout the country received part of his training in the Cook County Hospital.

The name actually covers a group of hospitals and institutions which function as special units with special services. It is a citadel of hope and trust for the indigent ill of a great city. Although a free hospital the services it provides are equal to the best that money can buy. There is no greater surgical skill, no greater medical skill, to be found anywhere. Cook County is a fountainhead for the best that is new and approved in medical science.

It has taken many years of efficient service to build up this reputation and prestige. From the beginning County has been blessed with great medical personalities, and for the most part it has been backed by public administrators imbued with the spirit of their responsibilities to keep the hospital at a high level of human service.

A bronze plaque over the big fireplace in the warden's



**KARL A. MEYER, M.D.**  
Medical Superintendent



**FRED A. HERTWIG**  
Warden

office states, "A county hospital was opened in Tippecanoe Hall on the corner of Kinzie and State streets, March 30, 1847." The plaque tabulates dates of subsequent construction. Accepting the Tippecanoe Hall date as the beginning doctors and officials of County planned a centennial celebration which was held in November, 1947.

The second entry on the plaque reads, "The City Hospital on La Salle street, between Cross and Old streets, was commenced in June, 1856, and com-

pleted in November of 1857." From the brief notations on the plaque we go to the Chicago Public Library for more detailed information. The dramatic details of episodes attending those early days may be found in *History of Medicine in the United States*, *Chicago's Accomplishments and Leaders*, and a collection of old newspaper clippings, including Wm. F. McDermott's full page article in the Daily News of August 2, 1941.

Between the times of the hospital in Tippecanoe Hall, 1847, and the City Hospital of 1857 is the curious incident of the little one-story-and-a-half hospital on wheels. In 1854, according to the records, Chicago was struck with a plague of





**Examined for chest ailment**

cholera. Existing facilities were inadequate to cope with the emergency and the local physicians demanded that the city provide a hospital to isolate those afflicted with cholera. The result was the little hospital on wheels.

For three years after the cholera epidemic had been brought under control the little rolling hospital continued to serve. Dr. Brockholst McVicker led a vigorous campaign for a more durable hospital with larger bed capacity. The arguments of the medical men proved most effective. The city fathers came through with \$75,000 and a three-story building was erected in 1857.

Preparing to take over and operate the hospital without delay the doctors found the city fathers had a different idea. The doctors were to be allowed only to administer their professional skill for the benefit of the patients in the hospital. The doctors stood fast and declared they would not be dominated. Neither side would compromise and the new hospital remained empty for two years.

With no progress toward an agreement the hospital was then leased to private interests who lost no time in putting the hospital into immediate operation. It continued under private management until 1862 when it was requisitioned by the federal government to serve the army during the Civil War.

### **County Takes Over**

On November 11, 1865, the War Department relinquished its tenure. Immediately Dr. Joseph P. Ross and Dr. George K. Amerman took up the cudgels to have the hospital taken over by the County as a charity institution. Past differences were ironed out and the Board of Cook County Commissioners took it over in 1866, thereby establishing a continuous county operation from that time on.

Once more the Chicago doctors were happy and giving their all to heal the sick and disabled with hospital care for those unable to pay for such service. The fame of the Cook County Hospital began to grow. Its importance in the life of the community was well recognized. Then, in 1871, the great Chicago fire swept over the city and the hospital was wiped out.

But no fire could destroy the record of its usefulness during that first five years of its existence. The county commissioners promptly acknowledged the fact that they must build a new hospital. They would construct a new and

better building. The present site, between Harrison and Polk Streets, Wood Street and Wolcott Avenue, was purchased for \$145,000. Architects were put to work on plans and designs. Two pavilions were erected in 1875. And from that time on the county has continued to carry on its hospital improvements, tearing down the old as they became outworn and putting up new buildings as occasion required. The present two-block main building was completed in 1914. Vast new projects for reconstruction are being studied by the Board of Cook County Commissioners today.

It cost \$75,000 to build that first Cook County Hospital. The operating budget voted for the hospital in 1947 was \$6,380,641. Over 55,000 patients are admitted for treatment in the course of a year. It has a complement of 3,400 beds, according to the 1947 American Medical Association Hospital Services Register.

### **Some Patients Pay**

Paid service in the hospital is a relatively small part of the total cost of operation. During the month of September, 1946, a special study was made for comparison. It was found that cash receipts for service during the month amounted to \$41,823.55. Operating expenses during the month were approximately \$500,000. The basic, all-inclusive, rate charged is \$6 a day, subject to downward revision. The total number of patients admitted was 5,782—an average of 193 per day. On September 9, 290 bed patients were admitted. Only 14 per cent paid for their services.

There are close to 300 doctors in the hospital, equally divided between those classed as regular attending doctors and those who are associates. Figures reported January 1, 1947, show that a total of 878 nurses, including graduates and students, serve in the hospital.

### **Pioneers for Health**

Cook County Hospital has pioneered in many ways to restore health and save lives. The first blood bank in the world was established there in 1937. The mortality rate in saving babies prematurely born has been materially reduced through the special care and equipment provided for such cases. Tuberculosis research with the living cultures of BCG vaccine brought from Pasteur Institute, France, in 1934 is now being used to inoculate hundreds of Chicagoans exposed to tuberculosis. Special handling for tetanus patients has been developed. Extensive research has been carried



**Receiving injured boy from ambulance**



out in the study of cancer and tumors at the Hektoen Institute, an adjunct of the county hospital.

In spite of the demands of war for doctors and nurses the hospital has continued to maintain its standard of service, even though that service was inevitably affected by the war. Through its research activities it performed valuable work in developing techniques and methods. At the conclusion of the war the commissioners made available the facilities of the hospital for emergency maternal and infant care of families of veterans. More than 150 wives and mothers were hospitalized during 1946. As space in the Veterans Administration hospitals becomes available these cases are transferred.

## GENERAL HOSPITAL

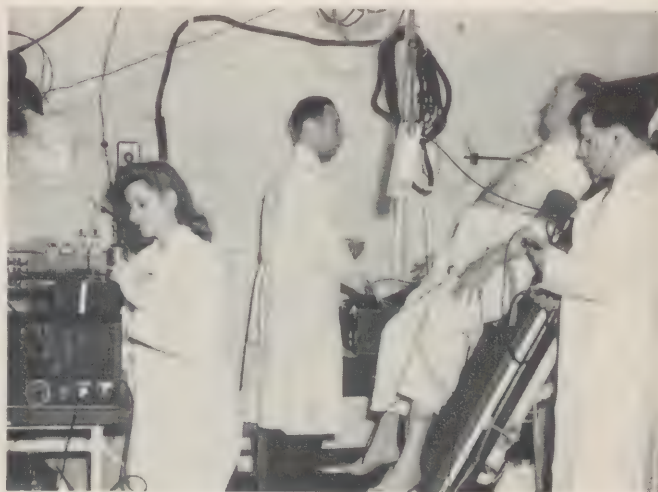
*MATERNITY records show 5,866 babies born in year . . . premature infant death rate reduced from 90 to 18 per cent . . . 73,200 x-ray examinations in year . . . clinical diagnoses and research work side by side . . . 37,250 ampules of penicillin dispensed . . . 2,776,422 meals served in year.*

**H**ISTORICALLY, the oldest of the Cook County hospitals is the General Hospital, which includes the hospital administration. From this central stem the branch units have grown.

The Board of Cook County Commissioners as a whole, an elected body, serves the hospitals as a Governing Board. Currently the members are: William N. Erickson, president; James F. Ashenden, Frank Bobrytzke, William Busse, Elizabeth A. Conkey, Arthur X. Elrod, Christ A. Jensen, John Mackler, George A. Miller, George F. Nixon, Daniel Ryan, Clayton F. Smith, Edward M. Sneed, Marie G. Tonelli and John E. Trager.

The entire Board of Commissioners also serves as the Cook County Hospital Committee under the chairmanship of Arthur X. Elrod. The administrative staff consists of Karl A. Meyer, M.D., medical superintendent; Ole Nelson, M.D., medical director, and Fred A. Hertwig, warden.

Most admissions to the General Hospital are first taken to an examining room, some are referred from the Fantus clinic. The patient is interviewed by representatives of the



**Delicate instruments record irregularities**

institutional service department of the Cook County Bureau of Public Welfare. Those who are accepted for treatment are placed in the wards or sections where similar cases are hospitalized.

Emergency cases resulting from motor and other accidents, or from criminal acts, are received and given immediate treatment in the General Hospital. No questions are asked as to whether the victim is financially able to pay for such medical services.

### Care for Infants

Babies are given special consideration at the General Hospital. They are under a doctor's care from their prenatal days when the expectant mother is advised how to care for herself and be prepared for the important event. When the mother is delivered of her child the care continues until both are able to leave for their own home.

Thousands of babies are born here every year. The facilities and medical skill employed in obstetrical cases are unsurpassed. Cook County Hospital's reputation as an aide to Sir Stork grows with each passing year. For example: Records for the year 1946 show that 5,866 babies were born there in that year as compared to 4,374 in 1945.

The hospital also has a fine record in saving babies prematurely born. Incubators in the Children's Hospital and two portable Hess ambulances (incubators) are saving many of these tiny infants who begin life so precariously. Nurses are trained as specialists to give the premature baby the particular care he must have. The mortality rate for babies weighing less than five pounds was 90 per cent not many years ago. At the Cook County Hospital it has been reduced to 18 per cent and is expected to become lower as the facilities and techniques continue to improve.

### Aged Also Served

Care for the aged who suffer from the infirmities that come with advanced years represents a considerable factor in another group of patients to be found at the Cook County General Hospital. Only those who are suffering from acute chronic illness can be cared for in the General Hospital. Others who have become too feeble to work and are indigent are sent to the Oak Forest Infirmary. Should such cases become critical they often are brought to the General Hospital for special medical treatment.

*(Continued on page 20)*



**Little patients receive occupational therapy**





**L**OOKING down over the shoulder of the Chicago Aerial Survey photographer as he slid through cloudless sky from the east you would have seen some of the more important buildings of the Medical Center District as they appear in the above photograph. Take a good look because it will not be long before the picture changes. Many of those little squares and oblongs in the background will disappear. In their place will come tall and graceful structures marking

many new institutional buildings planned for the near future.

But here you see the foundations for all that is to come. The numbers identify the buildings: 1. Illinois Neuropsychiatric Institute. 2. University of Illinois Nurses' Residence. 3. University of Illinois Power Plant. 4. State Dept. of Public Welfare, Institute for Juvenile Research. 5. Illinois Surgical Institute for Children. 6. University of Illinois Hospital. 7. U. of I. Medical, Dental and Phar-





## AIRVIEW OF MEDICAL CENTER DISTRICT

macy Colleges. 8. Cook County School of Nursing. 9. Chicago Illini Union. 10. Chicago Medical School. 11. Loyola University Medical School. 12. Cook County General Hospital. 13. Cook County Out-patient Dept. and Internes' Residence. 14. University Hospital. 15. Convalescent Park. 16. Loyola University Dental School. 17. Presbyterian Hospital. 18. Y. M. C. A. Professional Schools Branch. 19. Cook County Graduate School of Medicine. 20. Damen Avenue

to be developed into a half mile long Medical Plaza. 21. Presbyterian Hospital School of Nursing. 22. Proposed Congress Expressway.

Look especially at buildings numbered 14, 18, 19 and 21 which stand in the way of the Congress Expressway. These and all the buildings along that side of Congress Street are to be removed or torn down to make way for the Expressway development.



## **Cook County Hospital**

*(Continued from page 17)*

Facilities at the General Hospital frequently are the same as those utilized in the various units affiliated with the Cook County hospitals. During the war there evolved an urgent need for centralizing the laboratory services. The first step in this direction was the establishment in 1943 of the Hektoen Institute for Medical Research. Action by the county commissioners brought this well known institution under the wing of the County Hospital. Research and diagnostic laboratory work may now progress side by side and further development of these facilities is under way. Details will be found in the section concerning the Hektoen Institute.

### **New and Better Drugs**

The Department of Therapeutics is particularly concerned in the acquisition and testing of new drugs and the application of the various forms of therapy. Research finds the drug and proves it. Therapeutics evolves a standard of application for certain diseases.

Recently new types of therapeutic agents have been introduced for the treatment of amoebic dysentery, epilepsy, gastrointestinal infections, thrombosis, for mercury and arsenical poisoning, for certain skin lesions—among others. It is the function of this department to acquaint the house staff as to indications, contraindications and precautions in their use. To make certain of uniform accuracy instructions are carefully written out in an Administrative Educational Bulletin which goes both to doctors and nurses.

Sometimes the advent of new drugs necessitates a revision of established practice in certain cases. Some medicines are eliminated entirely from the list of drugs which may be prescribed. By the distribution of bulletins giving this information the attending staff and residents throughout the hospital are kept alert to the latest advances in the use of drugs.

The new drugs and their specific uses and limitations are becoming more clearly defined through the activities of this department. Special advances have been made in the use of sulfonamides, penicillin, streptomycin and the vitamins. During the year 1946 a total of 37,250 ampules of penicillin were dispensed, to cite one specific example of the extent to which one of these new drugs is used at the hospital. The greatly increased cost of keeping up with the new drugs is compensated not only in the saving of more lives but also, in part, by permitting quick recoveries. Penicillin is on the statistical record as having cut mortality rate for acute appendicitis from 6 and 8 per cent to 1 per cent.

### **Physical Medicine**

In the Physical Therapy Department the statistics show a remarkable increase during the past year. Patients taking this treatment during the year 1944-45 totaled 22,487. Over the same period during the next 12 months 29,118 patients were given this treatment.

In recent years there has been broad expansion in the Occupational Therapy Department. A nucleus for this department took shape over thirty years ago when a group of enthusiastic women opened up what they called a "Cheer Shop" in the General Hospital. They operated under the supervision of the Cook County School of Nursing. The "Cheer Shop" had for its merchandise various activities to prevent boredom for patients confined to the hospital for long periods.

Out of this philanthropic beginning in the east wing of the main building grew the Occupational Therapy Department, now located in the west wing. Miss Jessie K. Allen, the first trained occupational therapist to direct the department, was appointed in 1928. Her medical training and her knowledge of crafts and recreation as therapeutic measures proved a convincing argument in favor of occupational therapy. Later, with increased personnel to assist, her work was carried over from the General Hospital to patients confined at the Children's, Tuberculosis and Psychopathic Hospitals. Students came to this department for their clinical training.

Eventually Miss Ella V. Fay, a graduate of the Boston School of Occupational Therapy, was appointed director of the department in 1938. Under her direction the service was extended throughout the wards of the General Hospital and to adjoining units. It proved especially helpful for the newly blinded and burn cases, and for the orthopedics where closer coordination was brought about with the science of physical therapy. Both the occupational and physical therapy departments were transferred from the supervision of the School of Nursing to the General Hospital in 1942.

During the past year a new unit of the occupational therapy department was set up in the Children's Hospital, and the facilities have been expanded for the Psychopathic Hospital. The growing affinity between occupational and the physical therapy departments has culminated in a plan to have adjoining quarters on the seventh floor now operating as a department of "physical medicine."

### **The Child's Teeth**

A Children's Dental Clinic at 737 S. Wolcott Ave. is one of the expanding departments of the hospital. Parents have been awakened to the importance of care for the children's teeth as a matter of health. Special emphasis has been given to the tots who still have their baby teeth. The old fashioned idea to leave these teeth alone until they fall out is being discouraged at the clinic.

A full-time dentist employed by the hospital is assigned to rural clinics established at Oak Forest, Calumet City, Chicago Heights and Harvey. Crippled and otherwise handicapped children are brought to the Central Clinic, 737 S. Wolcott Ave., by a Board of Education bus.

### **The Magic Ray**

New equipment has been installed in the Department of Radiology since the close of the war. The teaching staff, disrupted during the war, is back in harness. Patients now have the benefit of "the best in diagnostic ability, and to the residents, interns and post-graduates come the opportunity and benefits of studying first-hand the many interesting and unusual diseases that are found only in so large an institution as the Cook County Hospital."

The American Board of Radiology has given its endorsement to the department as a teaching center. The fame of the department in this respect may be judged from the fact that over 150 physicians from the United States, Canada, Mexico and South American countries have studied the techniques of X-ray, X-ray therapy and radiographic diagnosis in this county hospital department. The radiographic and therapy departments X-ray and give deep therapy and radium therapy to more than 6,100 patients per month or 73,200 patients per year. This number includes both hospital and clinical cases.



### Blood Bank

The Blood Preservation Laboratory has drawn more blood from donors and prepared more blood for transfusions during the past year than any other year since its inception as the first blood bank in the country. The statistics show: Bloods—9,477; Plasma—3,549; Donors—9,859. Cook County Hospital prepared 285 blood transfusions which were loaned to other hospitals in the period from October 1, 1945, to September 30, 1946.

### Medical Records

Over a wide spread of every kind of human ailment the Medical Record Library of the General Hospital has kept case histories of generations that have come and gone, and of the generation that is passing. The records extend through those who have been admitted not only to the General Hospital but also to the Psychopathic, Contagious, Tuberculosis and the Children's hospitals, a record exchange exists with the Oak Forest institutions, Juvenile Detention Home and with the service of the Cook County Physicians. This storehouse of information forming the Record Library is consulted by research workers and other interested authorities from all sections of the country and from abroad. The volume of this data became so great that in 1938 the library began the processing of records into microfilm, thereby conserving storage space. New procedures are on file for reference in the Medical Record Library. It is consulted for articles in medical publications, periodicals and books.

In the Medical Library may be found the latest in text books. Friends of the hospital make frequent contributions of medical literature. The library receives 54 journals and back numbers are on file from 1938. The library was commended by the American College of Surgeons in its recent survey.

### An Important Item—Meals

The Dietary department served 2,776,422 meals during 1946, the highest number since 1943. The increase went mainly to the general and therapeutic diets served to patients and in the doctor's dining room. The increases appear in high protein, high caloric and high vitamin diet. War surplus foods proved so beneficial after the war that the general diet pattern was changed somewhat to provide two different smaller portions rather than one large portion of a single item.

Proper and palatable food for the sick is an important factor in the natural processes of healing and recovery. For that reason the Dietary department is a very important function of the hospital. In some instances where therapeutic diets are served the precise foods are carefully and accurately weighed so that the meal as served amounts practically to a doctor's prescription. The latest available records show that 574,736 therapeutic diets were served in one year, constituting one-fifth of all meals served.

Internes and resident doctors must eat and sleep for a large part of their term of service in the hospital within call. Meals served to doctors during the year totaled 275,475. Meals served to patients in the General ward diets totaled 1,862,744.

### Nutrition Clinic

Special units in the Dietary department include a nutrition clinic and a milk laboratory. There also is a program for hospital dietetic training. Graduates from this training

school are in demand for important positions in other institutions, especially in the new Veterans Administration hospitals.

Other important service departments in this huge hospital include the hospital laundry, transportation, maintenance, housekeeping, upholstery and supplies.

Throughout its long career the hospital has enjoyed the heart-warming evidence that the citizens of Chicago and Cook County in common with the majority of American citizens are eager to help those who are unfortunate and in pain. Individuals and groups have been quick to respond to a call for help. At times when there has been a dearth of workers to be employed in a regular capacity the hospital has been obliged to call for volunteers. The volunteers have come in and taken over the tasks of mercy, giving of their zeal and energy ungrudgingly.

## COOK COUNTY

# SPECIAL SERVICE UNITS

*INCLUDED in the Cook County Hospital Group are these special units, each designed to serve a special purpose:*

**Psychopathic Hospital**, where persons suspected of various kinds of mental ailments are admitted for observation and examination by psychiatrists. County Court hearing determines whether the case is dismissed or the patient is to be committed to other institutions for treatment. Over 6,000 cases pass through the Psychopathic Hospital annually.

**Children's Hospital** is equipped with 450 beds, where more than 8,000 children are cared for in the course of a year. The ward for prematurely born infants is world-famous.

**Contagious Disease Hospital**, an institution that has served the community for the past 40 years. It is designed to isolate especially communicable diseases.

**Tuberculosis Hospital** maintains 340 beds for the care of acute cases of tuberculosis.

**Hektoen Institute** laboratories for research and diagnostics.

**Fantus Outpatient Clinic**, where 146 physicians handle 151,227 patient visits.

**Cook County School of Nursing**—houses 820 nurses in training.

**Institute of Legal Medicine (County Morgue)**—a center of training in pathology; 1,233 autopsies performed in year.

### The Psychopathic Hospital

THE PSYCHOPATHIC HOSPITAL today is an outgrowth of the old Detention Hospital established in 1883 for the confinement of individuals believed to be insane—a place where they were held for safe keeping until their status could be determined by the court. A detention hospital was associated with the county jail.



Research and study into the causes and cures for the mentally ill have brought about improved understanding and a different kind of treatment. The detention hospital was separated from the county jail and became a wing of the county hospital. It is still under the jurisdiction of the county court but when the present building became available for use in 1914 the name was changed to Psychopathic Hospital. While it still maintains its function as a detention hospital, pending referral or release, its facilities permit limited therapeutic treatments and diagnosis.

Only in recent years have complete psychopathic case histories been kept. Current information states that during the first ten months of 1946 there were 2,096 female and 4,119 male patients received in the Cook County Psychopathic Hospital. Scientific research is in constant progress. About 4,000 slides were made of microscopic sections of brain and spinal cord tissue and utilized for study during this period.

The county physician serves as the medical head of the institution by appointment. Nurses are especially trained to attend psychiatric cases. They come to this specialized service from other affiliated hospitals. The staff includes 11 graduate nurses. These are augmented by a large group of student nurses. There is a full-time occupational therapist. Graduate nurses supervise hydrotherapy and psychometric testing. Eight psychiatric social service workers and five stenographers operate the social service department.

In 1928 the Cook County Psychiatric Hospital was the first to be approved by the American Medical Association.

### **The Children's Hospital**

The Children's Hospital was one of the first of the special hospitals to be erected as a separate unit of the Cook County Hospital. It is an eight-story building and was built in 1903. The annex was added later. The daily census shows between 325 and 350 patients. Approximately 8,000 children are received as patients in the course of a year. There are 450 beds.

On the staff are 14 attending pediatricians and their 14 associates, one assistant medical warden, 14 residents and six internes. Conferences are held monthly by staff physicians, members of the General Hospital staff and practicing physicians. Case presentations are submitted for study.

Special divisions are organized for the medical service. These include general medical, diabetes and nephritis, neurology, hematology, venereal diseases, tuberculosis, premature infants and cardiology.

One of the doctors' first prescriptions for a frail baby is an adequate supply of human mother's milk. Where nature has not thus provided for the child the hospital gets its supply from a regularly established milk station for wet nurses. A recent annual report shows that 30,972 ounces of milk were collected at the station during the year. Part of it was obtained from the obstetrical ward of the General Hospital. Should this supply fail there is a reserve of mother's milk preserved by the quick-freeze method. A total of 38,391 formulas are prepared in the course of a year.

The Social Service department investigates home conditions for outpatients and makes every possible arrangement to see that medical treatment recommended is provided.

The Service Club of Chicago in 1946 provided the Children's Hospital with new equipment to establish a unit for occupational therapy. To quote from the county commis-

sioners' annual report, "It is located on the seventh floor, adjoining the schoolroom and the playroom, which have been in use many years. . . . Its little white cottage encloses all storage cabinets, sink and the therapist's desk. A special wheel-chair table was built to make it easier to handle the wheel-chair patients and to insure good posture during treatments. Special stairs were built for patients who must learn to walk." Later, it was stated, a garage was to be built for the bicycles to be used for functional treatments.

### **Contagious Disease Hospital**

In 1903, at the same time the Children's Hospital was built, the Cook County Hospital constructed a special building for the treatment of contagious diseases. Thanks to the rapid strides of medical science in its unceasing battle against the more prevalent contagious diseases of forty years ago the need for such hospitals is rapidly diminishing. A United States Public Health survey in 1925 advised a reduction of beds allotted for contagious diseases in the Chicago-Cook County area.

"With increased knowledge," the report reads, "medical aseptic technique and better nursing care for the control of cross infections, the need for special facilities for communicable diseases is no longer present and such diseases can be adequately cared for in general hospitals." The Cook County Contagious Disease Hospital was built to accommodate 168 beds.

### **Tuberculosis Hospital**

The Tuberculosis Hospital of the Cook County Hospital was built in 1904, at a time when tuberculosis was making terrifying headway as the "white plague". The disease still challenges the sharpest minds in medical science but great progress has been made in stamping it out. That it thrives best in the crowded city environment is indicated by the fact that only 5 per cent of the patients come from the county outside of Chicago. Most of the cases admitted have developed to the acute stage and only about 40 per cent survive. Between 700 and 800 patients are received in a year.

The medical staff includes a director and three internes. Nurse attendance is regarded as of primary importance in this last portal of hope for the acute cases. The nursing staff consists of three supervisors, three head nurses, four staff nurses and 13 student nurses. There are 16 attendants and one orderly. The county provides an environment away from the city for patients less advanced in stages of the disease. County cases are sent to the Cook County Tuberculosis Sanatorium at Oak Forest. This institution is an affiliate of the Cook County Infirmary. The fatality rate there is 16.4 per cent in the course of a year. During a typical year 192 cases were admitted and 143 discharged.

Although not located in the Tuberculosis Hospital the Tice laboratories have been actively engaged in exploring through research the use of the BCG vaccine for the prevention of tuberculosis. Cultures were brought to the United States in 1934 by Dr. S. R. Rosenthal at the request of Dr. Frederick Tice, eminent lung specialist. Thorough tests have been made, first on animals and later students and nurses in the Medical Center District. Recently the U. S. Health Service appointed the University of Illinois as the BCG center for production and distribution of the vaccine for the United States. A special laboratory will be erected in the District for this purpose.



## Cook County School of Nursing

A group of public spirited citizens of Chicago organized the Cook County School of Nursing in June, 1929. But it was a very famous school before it took that name. From 1880 up to that time it had been known as the Illinois Training School for Nurses. It was the first school of its kind to be organized west of the Alleghenies. Graduates from this school received top rating in all parts of the country.

Under the comparatively new name of the Cook County School of Nursing the organization has maintained the best of its traditions. It is a self-contained unit. Its primary purpose is to train nurses for the Cook County Hospital, and this hospital as an experience school is held in the same high regard by aspiring nurses as it is by young physicians who compete for internship there.

There is a long list of prominent names who sponsor the school organization. Officers of Administration and Instruction who head the Board of Directors for 1947-1948 are: Admiral John Downes, president; Hamilton K. Beebe, 1st vice-president; Leo Lyons, 2nd vice-president; Alfred H. Taylor, 3rd vice-president; Mrs. F. Jefferson Redfield, secretary and Monroe Cockrell, treasurer.

Nursing School and Nursing Service administration are under the direction of Miss Edna S. Newman.

Cook County Hospital contracts with the school for its nursing service. In making up the budget for 1947 the hospital received an appropriation of \$2,700,000 with which to pay the school for its nursing service, school training, and operation of the nursing home.

The 17-story nurses' residence at 1900 W. Polk St. was completed in 1935 and is considered one of the finest in the country. It is equipped with all modern facilities to insure a home-like atmosphere. Each of the 820 residents has her own attractively furnished room, and each floor has a kitchenette, a sitting room and a laundry. There are spacious general lounges where guests may be entertained. Physical recreation is provided for in the gymnasium, on the sun decks and balconies. There is an extensive library for study and reading. Graduate students create their own regulations through a cooperative government organization.

## Fantus Outpatient Clinic

The six-story and basement building housing the Fantus Outpatient Clinic and Internes Home is the lone survival of the old West Side Hospital. It was built in 1912 and stands at the southwest corner of Convalescent Park. It was named for the late Dr. Bernard Fantus, noted physician and teacher, who worked persistently through various groups to bring about the development of the Medical Center District toward its present goals.

Establishment of the Fantus Outpatient Clinic greatly reduced the traffic load in the General Hospital. It was designed to give diagnosis and treatment to ambulatory cases and additional treatment and observation to patients released from the General Hospital. Included are such cases as cardiac, gastro-intestinal, urologic, general post-operative, and post-natal.

A new division was created in April, 1946, for the special treatment of pre-natal and post-natal patients. Modern facilities and methods have made it the last word in clinics for this purpose.

Another division provides clinics for the gynecologic, vascular, rectal and orthopedic cases, for tumors, neurology,



School in Children's Hospital

skin, hand; eye, ear, nose and throat; oral surgery and pediatric allergy.

Clinics are manned by the intern and resident staff of the General Hospital, under the supervision of the attending staff so that there is a continuous link to the outpatient service of those who have been hospitalized. There are 146 physicians on the staff of the Fantus Outpatient Clinics. The total number of patient visits rose from 122,890 in 1944 to 151,224 in 1946.

## Institute of Legal Medicine

Old institutions take on new names in the Medical Center District as advancing research and understanding alter functions and develop new characters. Thus the gruesome sounding old County Morgue became the Coroner's Scientific Laboratory and in 1947 that name was changed to the Institute of Legal Medicine.

It is a three-story brick building facing on Polk Street, directly across the street from the University of Illinois campus and was built in 1929. There is a sign at the driveway entrance that still proclaims the place as the "Morgue," but the functions of the morgue are limited to the basement where the unclaimed dead are stored in refrigerated metal vaults for possible future identification.

The first floor is used as a receiving room where the public is admitted for inquiries and where inquests are held. There are six representatives of the coroner stationed on this floor and six on the second floor, half of which is utilized for pathological study and half for the toxicological laboratories. On the second floor there is a small amphitheatre for clinics. Students from the various medical schools in the District are assigned here on their respective days to observe methods and techniques in conducting autopsies. The third floor is utilized entirely by the Department of Pathology of the Cook County Hospital.

One medical scientist is credited with the transformation that has brought about the Institute of Legal Medicine. He is Dr. Wm. D. McNally, recently resigned, who was selected from the Rush faculty to serve as the first chief toxicologist for the coroner back in 1913. Dr. McNally established the first coroner's laboratories in the country. During the year ending September 1, 1946, there were 1,233 autopsies of which 841 were released to the coroner. This did not include 87 stillbirths reported to the coroner.



## COOK COUNTY HOSPITAL

# HEKTOEN INSTITUTE for MEDICAL RESEARCH

**H**EKTOEN INSTITUTE FOR MEDICAL RESEARCH is the latest and perhaps one of the most vital separate units to become an affiliate of the Cook County Hospital. This union of a separate and independent institution was effected in 1943 when the Board of Cook County Commissioners took over the properties of the John McCormick Institute of Infectious Diseases, 629 Wood street, directly across from the Cook County General Hospital.

The institution was renamed in honor of Ludvig Hektoen, M.D., whose inspired mission brought into being the original McCormick institution.

Because one person died of scarlet fever thousands of others live. The institute was founded as a memorial to John Rockefeller McCormick in 1902 through finances provided by Harold F. McCormick and Edith Rockefeller McCormick. Originally the name was "The Memorial Institute for Infectious Diseases, founded in memory of John Rockefeller McCormick."

On the first Board of Trustees were Frank Billings, Christian Fenger, Ludvig Hektoen, Charles L. Hutchinson and Stanley McCormick. Articles of the incorporation stated that the object would be "the study and treatment of scarlet fever and other acute infectious diseases and the investigation of allied problems."

### Achieve Dick Test

Dr. Hektoen served as the first director of the medical staff and it was the result of his inspiration that led Doctors George F. and Gladys Henry Dick to their discoveries of the cause of scarlet fever, a skin test now generally known as the Dick Test, indicating susceptibility to the disease, a method by which susceptible individuals may be immunized against it, and a specific antitoxin for its treatment.

Successful in a large measure the Institute nevertheless failed to achieve all the dreams and ambitions which Dr. Hektoen had cherished for it.

Finances were not the primary worry in the beginning, but the establishment of suitable quarters of a permanent nature consumed no little effort. In 1904 Otto Young, shortly before his death, gave to the institute the major part of a block just west of Washington Park. The Institute purchased the balance. But, before building operations could begin, vigorous opposition developed in the community and on the part of the city council.

As a result this location was abandoned and the Institute took quarters in a building of the Rush Medical College, 1743 W. Harrison st., where research work already had been started. In cooperation with the Presbyterian hospital a small hospital unit was taken over for the specific study of scarlet fever. This served for three years before the building

was removed to make room for a new pavilion of the Presbyterian hospital.

The block of property across from Washington park was sold and in March, 1911, the Institute took its affairs to the Northern Trust Co., trustee under the will of Mrs. Annie W. Durand. It was agreed that \$200,000, provided by the will, could be used to build a hospital to be called the Annie W. Durand Hospital of the Memorial Institute for Infectious Diseases.

### Long-Term Contract

The Institute agreed to furnish the ground and to conduct the Durand Hospital with a minimum of forty beds for the free care of poor persons suffering with infectious diseases. The contract entered into with the Northern Trust Co., specified that net income from funds left with the trust company would be used to defray expenses of operating the hospital but any deficiency should be made up by the Institute. The contract was to run for 99 years.

This bequest was further amplified by the City Council of Chicago which relinquished claim to \$75,000 Mrs. Durand had provided for a public bath house. The money was turned over to the hospital enterprise. The Institute was now able to purchase the larger share of the block bounded by Harrison, Wood and Flournoy streets and Hermitage avenue at a cost of \$152,000.

The modern, fireproof Durand Hospital building was completed in 1912 and the formal opening took place February 27, 1913. Patients were admitted immediately thereafter.

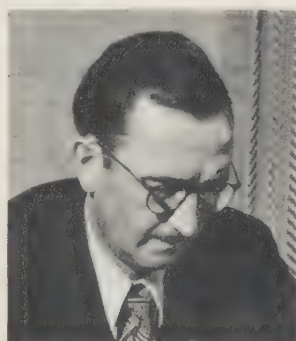
The four story and English basement laboratory was built the following year at a cost of \$100,000. It faces on Wood st., just north of the Durand building and the two buildings are connected on second and third floors by an enclosed gallery. There is plenty of room for the expansion of these facilities as the two buildings occupy only about one-third of the ground area. Additional gifts were provided by Mrs. Cyrus H. McCormick and in 1912 Harold F. McCormick presented the Institute with a farm at Lombard, Illinois, for the breeding of laboratory animals and to supply farm produce. In 1915 the Institute had total resources amounting to nearly \$2,000,000, the greater part having been contributed by the founders.

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### Follow Objectives

Through the years that followed the Institute followed the original objectives. They were listed as follows: 1. To organize, develop and support laboratories for research in medicine and surgery. 2. To extend the boundaries of science, whereby measures will be found to combat disease in general and to improve the care of the sick. At that time these objectives were especially focused on the study of infectious diseases to discover causes, methods of prevention, cures, and the most effective care for those afflicted by such diseases. Research was conducted in the laboratories and clinical material was found in the adjoining hospital.

Hard times came later in the Twenties. The McCormick support vanished with the death of the principals. Foundation securities shriveled in value. Property holdings were left to the University of Chicago. Research studies had not included causes and cures for shrinking working capital. Dr. Ludvig Hektoen saw his great program of research falling under a cloud of frustration.



DR. SAMUEL J. HOFFMAN  
Administrative Director  
Hektoen Institute for  
Medical Research



There came a day when the doors of the Institute were locked and the lights were dimmed. Shades were drawn at the Durand hospital and it stood silent and dark. A year passed, then another and another and then the University of Chicago offered the Institute properties for sale.

A prominent Chicago matron of means who had become greatly interested in psychiatry declared her intention of purchasing the properties and establishing an institute of psychiatry "for the white collar class." Those who had been interested with Dr. Hektoen in operation of the Institute were alarmed. They felt that the original purpose of the Institute should be resumed as planned. Dr. Karl A. Meyer, Dr. Samuel J. Hoffman and others took the matter in hand. They wanted the County to take it over. They were given 30 days with which to effect a deal. It seemed impossible. County commissioners take time to deliberate on such matters, and the two doctors were ready to dig down in their own pockets to make a \$10,000 deposit until the commission could effect a purchase. This was unnecessary it developed. The commissioners purchased the property for \$100,000.

### Consoled

And the lady who had been persuaded by the earnest pleadings of her father, attorney and several physicians to yield her great ambition was consoled by the fact that under the new control the Institute would continue in a broader field along the lines for which it was originally intended.

Under the new ownership the original objectives have been expanded. Reincorporated (not for profit), and renamed as the Hektoen Institute for Medical Research it is now delving into the major problems with which the whole medical world is most concerned.

Under the new set-up Dr. Hektoen, who is now 85 years old and still very active in medical research, is listed "Ex Officio" at the top of the Board of Trustees. It was intended that his name should be perpetuated in the name of the institution for which he worked so faithfully from the time of its foundation.

Dr. Karl A. Meyer is president of the board. Dr. Samuel J. Hoffman is the administrative director, and Dr. Hans Popper is the research director. Other prominent names on the Board include Aaron Arkin, M.D., Frank Bobrytzke, Britton I. Budd, Chester R. Davis, Wm. N. Erickson, Morris Fishbein, M.D., Andrew C. Ivy, M.D., William McFetridge, Raymond W. McNealy, M.D., Donald M. Nelson, Arthur H. Parmelee, M.D., Daniel B. Ryan, Guy E. Reed, Brig. Gen. Frank Schwengel, James P. Simonds, M.D., Clayton F. Smith, Frederick Steigmann, M.D., and Italo F. Volini, M.D.

No funds are provided by the county for the maintenance of the Institute. All such public funds in most cases here and elsewhere are devoted directly and solely to the care of the indigent sick. The public spirited citizens bent on preserving the functions and ideals of the Institute have vitalized the plan for financing now in effect. The Institute is still dependent on philanthropic grants. The Dr. Jerome D. Solomon Memorial Research Foundation brought in substantial assistance in 1946 and maintains an office in the Institute. It provides fellowships for outstanding students to conduct research projects in the Institute. The memorial is in honor of a young medical officer who died under heroic circumstances at Sansapor in Dutch New Guinea. During the past two years 33 important papers on research activities have been published.

Durand hospital, which at present is being used as

interne quarters, is expected eventually to be utilized by the Institute in the expansion of its laboratories.

### Philanthropic Support

Routine hospital laboratory work is carried out side by side with investigative work. The latter, supported by private funds, is of particular benefit to the hospitals by providing laboratory reports used in the diagnosis and treatment of patients. These reports have an additional benefit in that they show the therapeutic value of certain drugs under specific circumstances, they also provide specific information in the use of various items of equipment under certain conditions.

Pharmaceutical houses have made large contributions of new drugs to the Institute for research. Indigent patients have had as a result the advantage of drugs so costly that otherwise they would have been prohibitive. Penicillin, during the early days when it was scarce and restricted to use of the armed forces, was available to county hospital patients through the research laboratories of Hektoen Institute. Upward of \$70,000 worth of penicillin and \$20,000 worth of amino acids were contributed to Hektoen.

Hektoen Institute has been widely recognized as a scientific center. It functions to assist in solving problems in therapy and diagnosis for individual patients, and as a teaching source for staff physicians not only in the county hospital but for other medical institutions located throughout the county. Currently (1948) the Institute is conducting studies on protein metabolism, lukemias, rheumatic fever, liver and kidney diseases and antibiotics (penicillin, streptomycin, tyrothricin) vitamins and others.

Special laboratories are set up in the Hektoen Institute for such subjects as bacteriology, serology, biochemistry, pathology, surgical pathology and hematology. From September 1, 1946 to September 1, 1947 a total of 15,282 tests were made in the bacteriology department. During the same period 64,030 tests were made in the serology laboratory. In the biochemistry laboratory the director is assisted by a chief chemist, senior chemist, four biochemical technicians, and a laboratory helper. The addition of a new photoelectric colorimeter enabled the laboratory to increase the number of tests during the year indicated to a total of 65,405.

### Autopsies and Biopsies

During the year the department of pathology reported on 5,978 deaths. There were 1,348 autopsies (exclusive of stillbirths and psychiatric cases). The laboratories for surgical pathology examined a total of 7,597 gross specimens and tissue biopsies. About 24,276 microscopic slides were prepared.

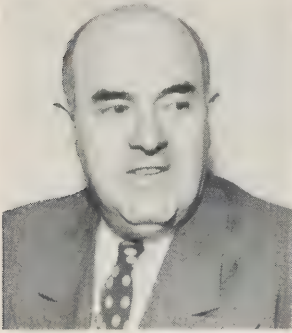
In the hematology laboratories the routine work consists of performing complete blood counts on all cases admitted to the medical wards, and the doing of blood counts on oxalated specimens sent to the laboratory by the surgical and obstetrical wards. These and a multiplicity of other hematological procedures brought the number of determinations for 1947 to a total of 73,940. The anemia clinic receives visits from outpatients twice weekly and during the year there was a total of 3,029 such visits. The laboratory also provides post-graduate courses in hematology. These are held under the auspices of the Cook County Graduate School of Medicine for graduate physicians.

Research is conducted with the aid of funds provided by individual donors and commercial houses. Leukemia and pernicious anemia are among the most important subjects of research by the department.



# The JUVENILE COURT and JUVENILE DETENTION HOME

AT THE EXTREME south-west corner of the Medical Center District there is a sharp triangle of streets where Ogden Avenue, which slashes through the District diagonally, intersects Roosevelt Road at Oakley Boulevard. Facing the criss-cross of streets at the apex of the triangle is an imposing gray stone building. This is the Juvenile Court, a branch of the Cook County Circuit Court.



JUDGE JEROME J. DUNNE  
Cook County Juvenile Court

Entering the court building from the front and passing directly through the rotunda you emerge from the rear entrance. Across the winding driveway stands the Detention Home—a sizable brick building. This is the Home that affords temporary shelter to thousands of boys and girls in the course of a year who transgress the laws of the land, or have been taken in charge as neglected and homeless waifs of the city who need shelter and care.

Back of the Home is a large playground, walled off from the adjoining streets. Nestling close to the main building are low temporary school units. Soon these will be replaced by a modern brick school. Recently (1947) the people of Cook County bonded themselves for \$500,000 with which to build the school and to make other greatly needed improvements.

Chicago women who put ideas and words into action are to be forever thanked for bringing the Juvenile Court and Home into existence. The Court and the Home stand today as a monument to their tireless efforts. More than a decade of persistent campaigning by committees of the Chicago Womans Club brought about the Illinois Juvenile Court Act of 1899. Passage of this Act established the first Juvenile Court in the United States and the world. But the legislators forgot to provide a paymaster with money to pay for wages and other expenses.

From 1899 to 1903 the Illinois Industrial Association struggled along with this problem assisted by active cooperation on the part of the Chicago Woman's Club. The first Detention Home was established in a building formerly occupied as a private residence at 1726 W. Adams Street. At the rear of the residence was a two-story barn. Food was served on the first floor of the barn and 50 beds for boys were placed on the second floor. Girls and small tots lived in the residence. In 1903 the Juvenile Court Committee of the Chicago Womans Club took over the entire responsibility for the Home. They raised money with which to pay salaries of the probation officers and other expenses. They supervised the management, got a retired fire department horse and a small pony to haul an omnibus with which to transport the children back and forth from the Home to the Court. The fire horse always thought he was heading for a fire and had to go lickity-split. The pony knew nothing about fires and was lifted clear of the ground and almost strangled when the fire horse took off with the omnibus.

## Detention Home

Arthur J. Audy, present superintendent of the Detention Home, is a vigorous young man fully conscious of his extraordinary responsibilities. He maintains an alert staff of assistants and personally watches over every detail of the activities within the institution.

In a report issued recently Mr. Audy traces the trend of the overcrowding conditions. During the years from 1907 to 1912 an average of 2,500 children were admitted each year. Then came the critical year of 1913 when 3,311 children were admitted. At the end of the first year when the new Home was completed in 1924 there were 7,293 children admitted to the Home. Five years later the record shows 9,532 admissions.

Although only girls under 18, and boys 17, are admitted to the Detention Home and hearings in the Juvenile Court are limited to children in this age category it was apparent that the continued expansion of cases would require some kind of new adjustment. The crisis came in 1934 and 1935 when agitation got under way for the construction of a new wing to the home.

But this proposal met strenuous opposition from those who argued that under the current system overcrowding would continue to be a perpetual problem. They proposed that as an alternative plan there should be introduced some new method of procedure. A group of five professional workers was appointed to study the problem. The result was the establishment of an Intake Department to screen out the minor cases and eliminate those who might be detained no longer than a day. This department began functioning February 11, 1937. The Intake Department works directly under the Cook County Board of Commissioners. At the end of the first year of operation, 1938, admissions to the Detention Home dropped to 3,342. The effect of this decrease in numbers was somewhat offset by the fact that those who were detained in the Home remained longer. The average length of stay increased from 19.8 days in 1936 to 28.3 days in 1938. Mr. Audy reports that for the fiscal year (December 1), 1947, there were 3,799 children admitted in the Home.



ARTHUR J. AUDY  
Supt., Cook County Juvenile  
Detention Home

## Delinquency Decrease

Currently (1947) there has been a notable decrease of new petitions to the Juvenile Court in cases of delinquency, and some decrease in truancy although 1946 showed an increase over 1945. On the other hand cases of dependency have steadily increased. These are the figures: 1945 Delinquency—Boys 2,120, Girls 528; Dependent—Boys and Girls 2,162; Truant—Boys and Girls 442; Feeble-minded—Boys and Girls 170. 1946 Delinquency—Boys 1,906, Girls 487; Dependent—Boys and Girls 2,282; Truant—Boys and Girls 600; Feeble-minded—Boys and Girls 105. 1947 Delinquency



—Boys 1,669, Girls 484; Dependent—Boys and Girls 2,426; Truant—Boys and Girls 395; Feeble-minded—Boys and Girls 115.

The 1947 report comments on the complaints, "During the past year some of the most acute situations referred to the Complaint Department were due to (a) Inadequate Housing. A pressing problem is that of housing and evictions. It has resulted in many broken homes, crowding and forced assumption on the part of the Court . . . of finding places not only for the children but also for the parents. (b) Both Parents Working. This often is a necessity because of the father's inadequate income, in view of the high cost of living. Often parents work at night or in shifts and have little time to plan together for the training and supervision of their children. (c) Malicious Mischief. This includes property damage and personal injury. There has been an apparent increase in the number of children who have not been trained to have proper respect for the property rights of others."

The total number of complaints made in 1947 was 8,252, slightly less than the 8,443 complaints that were made in 1946. Of the 8,252 cases 779 were referred to other agencies, 2,066 were adjusted, 3,726 were accepted for investigation, and 1,681 petitions against delinquent boys were authorized for filing. In 1946 there were 2,021 petitions authorized for filing against delinquent boys.

Because of the housing conditions the Court has found it increasingly difficult to find foster homes. The County Commissioners appropriated \$475,000 for this purpose. Half of the amount of money expended for foster home care and institutional placement is refunded by the state.

The Juvenile Court and the Juvenile Detention Home will soon celebrate their Fiftieth Anniversary. Similar institutions have been established in many other large cities since the Illinois Act was first passed in 1899. Besides the many expedients that have been devised to give dependents and delinquent children the utmost consideration scientists are conducting studies as to causes that lead to aberrant social

relations in children. Associated in this direction is the Institute for Juvenile Research, an agency of the Illinois Department of Public Welfare at 907 Wolcott ave. From 1917 to 1930 the Institute was a function of the Court. Today, while it continues to serve the Court, it is maintained by the Department and is partially staffed by the University of Illinois.

### Raise \$100,000

The shaky old omnibus described earlier was not accustomed to such rambuncions and one day part of the floor fell out. Eventually the Juvenile Court Committee had to raise money to buy a new omnibus and a team of horses. In the period from 1903 to 1907 the committee raised \$100,000 to pay salaries and take care of such expenses. Then an amendment was passed to the Act making the county responsible as paymaster. The city and state also share in certain expenses.

In a volume, *The Child, the Clinic and the Court*, published in cooperation with the Wieboldt Foundation, are compiled a score of papers by the pioneers in the field. They were read at the 25th anniversary of the Court in Chicago. Chicagoans would be horrified today at conditions that existed before the Court was established. Mrs. Joseph T. Bowen, formerly a president of the Juvenile Court Committee, wrote, "Many of the cases were most pitiful. I remember one eleven-year-old little girl who held in her arms what I thought was a doll. I later discovered, to my horror, that the 'doll' was the child's own baby; she had forgotten the name of the father." Another instance cited by Mrs. Bowen: "I remember two children, a boy and a girl, who had been found in a pig-pen; their mother and their father must have been out of their minds because they had kept the children in with the animals, wearing no clothes and eating only food furnished the pigs. They did not know how to talk and jabbered like little animals."

The first Juvenile Court and Detention Home designed and erected for that purpose was opened under the auspices



COOK COUNTY JUVENILE COURT AND DETENTION HOME



of the Cook County Board of Commissioners in 1907 at 771 Gilpin Place (formerly Ewing street). The city furnished the land and the county appropriated \$150,000 for the building.

By 1913 the movement of clearing juveniles through their own Court and Detention Home as a functional unit of procedure had gained such momentum and recognition that the institution was sadly overcrowded. It was decided to turn the premises over in toto for the Home and hold the Court hearings in the County Building. While this alleviated the situation for a time it became obvious that the Home on Gilpin Place was inadequate, not only from overcrowding but because of the neighborhood surroundings. The superintendent complained to the county commissioners that "soot rained into the home, laundry bills were enormous, the children could not be kept clean and they were constantly annoyed by men and boys in the neighborhood."

#### **\$1,000,000 Court and Home**

The people of Cook County were aroused. In November, 1919, they approved a million dollar bond issue for new quarters for the Court and the Home. Land was purchased and the buildings constructed in their present location. The new quarters were opened in 1923 and now in November, 1947, another half-million dollars is to be expended to enlarge these facilities.

For 15 years the chief administrator of the Juvenile Court has been Hon. Frank H. Bicek, who recently resigned, was the presiding judge. When interviewed for this report Judge Bicek said that he considered the Juvenile Court an appropriate adjunct of the medical institutions located in the District.

"Children brought into this court need special care," he asserted. "They need medical care and they get it here. Many of them are victims of unhealthy home conditions—morally and otherwise. At a recent convention held in Boston I heard a noted jurist specifically state that the Juvenile Court is a hospital. This I believe to be a true appraisal. We can't give all the children who come before us new parents, new homes and new environment but we try to give them the best that the law allows. If one plan doesn't work we try another."

#### **Notable Judges**

There were a number of notable judges who preceded Judge Bicek, starting out with Judge Richard S. Tuthill. Later came Judge Julian W. Mack, Judge Merrit W. Pinckney, Judge Victor P. Arnold and Judge Mary M. Bartelme who was the first woman judge. Judge Bartelme, as a member of the Womans Club, had been one of the leaders to advance the proposal for a Juvenile Court, and long before she was given full recognition as a judge she had served as an assistant judge in hearing cases of delinquent girls. Her recommendations were approved by the presiding judge.

Judge Robert J. Dunne, succeeding Judge Frank Bicek, was appointed January 8, 1948 to preside over the Cook County Juvenile Court, to listen to approximately 3,000 cases a month and, with sympathy and understanding, to attempt to bear down on the rising curve of juvenile delinquency.

#### **Probation Officer**

Woven into the history of the Juvenile Court is the career of one man who began serving the Court 35 years ago. This man is Col. Harry Hill, who today is chief probation officer, an office that he has held for the past 20 years. Judges and

social workers say that Col. Hill is a natural for the job. He has the qualifications outlined for the job by Mrs. Alzina Stevens, the first probation officer who said probation officers "must be men and women of many sides, endowed with the strength of a Samson and the delicacy of an Ariel. They must be tactful, skillful, firm and patient. They must know how to proceed with wisdom and intelligence and must be endowed with that rare virtue—common-sense." Col. Hill has demonstrated these qualities through the years. During World War I he served as captain of field artillery. He continued with the Illinois National Guard until his voluntary retirement in 1941 when he resigned as chief-of-staff of the Thirty-third Division, commissioned as a colonel.

## **COOK COUNTY**

# **Bureau of Public Welfare**

*COOK COUNTY is represented in the District by both the Welfare Bureau and the Department of Public Health and both agencies function in operations of County Hospital. Their services are extended throughout the county.*

**B**ESIDES the Cook County Hospital and its subsidiary units located in the Medical Center District the County is also represented by its Bureau of Public Welfare, and the Cook County Department of Public Health.

The welfare bureau maintains an Oak Forest Service unit at 739 South Winchester Avenue including four divisions:

1. Public Assistance Division, whose functions include the administration of Old Age Pensions, Aid to Dependent Children and Blind Assistance.
2. Institutional Service Division, in charge of determining admissions to Cook County Hospital and the Oak Forest institutions, and making collections for the care and maintenance of persons admitted to those institutions; and medical service in the homes of indigent persons.
3. Court Service Division, providing social services upon the request of the Courts of Cook County, both civil and criminal, in instances involving social, economic and home conditions, and the securing of support for dependent persons from legally liable relatives.
4. Behavior Clinic of the Criminal Court, a diagnostic psychiatric service, organized to serve in an advisory capacity to the judges of the Criminal Court.

The Cook County Bureau of Public Welfare was established by state law in 1925, and an Advisory Board set up, consisting of 45 members, representative of welfare and civic interests, who are appointed by the President of the Cook County Board of Commissioners. Their function is to advise with the director of the Bureau and the Commissioners as to policies and techniques of administration.

#### **Cook County Department of Public Health**

Significant among the developments in public health in suburban Cook County during the past year was the establishment of the Cook County Department of Public Health

*(Continued on page 41)*



# LOYOLA UNIVERSITY

*FOR generations the Jesuits have been recognized as outstanding for their achievements in the field of medicine. Loyola Medical and Dental Schools maintain the best of these traditions. They are now moving forward in a big expansion program in the Medical Center.*

**L**OYOLA UNIVERSITY, with plans for new developments in the Medical Center District, is at present operating medical and dental schools in separate buildings. Present plans contemplate bringing these two units under one roof and the possible erection of other teaching facilities.

## Loyola Medical School

Medical history has been made by the Jesuits who operate the Loyola professional schools.

The Jesuits entered the field of medicine by affiliating with other existing institutions. About 1910 Loyola University followed the example of the other Jesuit institutions in this policy of affiliation, and aligned itself with several medical schools, the largest of which was the Bennett School of Medicine, located on the corner of Ada and Fulton Streets, a School which had been established in 1869.

In 1915, a few years later, Loyola took the next step in the process of development and bought outright the affiliated units of the Bennett School which then became the medical department of the university. Two years later Loyola purchased the Chicago College of Medicine and Surgery, located in the Medical Center District at the same location as that of the present Loyola University School of Medicine. The Medical School is operated as an organic part of the Loyola University. The facilities have been co-educational since organization.

## Administration

The officers of administration for the Loyola School of Medicine are: Rev. James T. Hussey, S.J., President of Loyola University; Rev. Michael I. English, S.J., Regent of the School of Medicine; James J. Smith, M.D., Ph.D., Dean; Thesle T. Job, Ph.D., Preclinical Dean; Charles J. Thill, B.S., M.D., Clinical Dean; Wilbur R. Tweedy, Ph.D., Secretary to the Faculty; and L. F. Grapski, M.B.A., Director of Administration.

The Executive Committee includes Dean Smith who serves as Chairman; Rev. Michael I. English; Dr. Job, Dr. Thill, Robert J. Willmes, S.J. and L. F. Grapski. A Council of the teaching staff consisting of the Dean, the Regent, the Secretary of the Faculty, and the Chairman of the departments, is concerned with educational activities. The Council, subject to the approval and under the direction of the Board of Trustees of the University, is invested with power and authority in the organization and the conduct of the Medical School, dispensary, and hospitals, together with the executive administration incident thereto.

Hospitals affiliated with the School of Medicine are: Mercy, St. Ann's, Lewis Memorial Maternity, Holy Cross, St. Elizabeth's, Misericordia, St. Francis, St. Vincent's Maternity,



Very Reverend  
JAMES T. HUSSEY, S. J.  
President

Cook County, Municipal Contagious Disease, and Illinois Eye and Ear Infirmary. The University Hospital at Congress St. and Wolcott Ave., recently was taken over as an adjunct of the School.

There are 146 courses and 206 teachers for the 289 undergraduate students. Basic Science Departments cover Anatomy, Biological Chemistry, Pathology, Pharmacology and Therapeutics, and Physiology. The Clinical Departments cover Medicine, Surgery, Pediatrics, Obstetrics and Gynecology, and Bone and Joint Surgery (Orthopedics). Specialties or Adjunct Services cover Experimental Medicine, Urology, Dermatology and Syphilology, Neurology and Psychiatry, Otorhinolaryngology, Ophthalmology, Public Health and Bacteriology, and Roentgenology.

Departments for graduate study cover Anatomy, Physiology, Pharmacology and Pathology. A graduate faculty of 24 provides the instruction. These with instructors in various specialties make up a total faculty of 300.

The entrance requirements of the School of Medicine include the completion of high school with 7 required units and 8 elective units. The minimum college requirements are 90 semester hours of which many are prescribed courses. Applications are submitted to the registrar's office. The Committee on Admissions makes the selections.

## Curriculum

The formal medical course in Loyola University School of Medicine comprises four years of thirty-six full weeks of instruction.

In the freshman year the subject matter of gross and microscopic anatomy is correlated. The time allotted to anatomy is approximately twenty weeks. During this period the study of anatomy is the first and only concern of the student. In the final sixteen weeks of the academic year, time is equally divided between biological chemistry and physiology. Throughout the year a one-hour lecture per week is given by some teaching member of the clinical faculty on the relation of the subject being studied to clinical medicine.

In the sophomore year the time of the first quarter and approximately eight weeks of the second quarter are given over to the departments of bacteriology and pharmacology. In the final one-third of the second quarter and during the third quarter courses are given in pathological anatomy. In the third quarter courses in regional anatomy and introductory courses in clinical medicine, surgery, and their branches are given. The clinical courses include introductory obstetrics, physical diagnosis of the normal child, otolaryngology, medicine, surgery and public health. The regional anatomy is correlated with the clinical subjects. In the last eight weeks of the academic year a review course in neuroanatomy



is given to prepare the student for his studies in neuropathology and regional neurological diagnosis given in the first quarter in the junior year. In the third quarter also the sophomore spends three hours per week in the out-patient department. During this period he rotates on various services, whereon emphasis is placed upon history taking and physical examination.

### Junior Year

In the junior year emphasis is placed upon didactic instruction in medicine, surgery, obstetrics and gynecology, and the specialties. This work is complemented by services in various clinical divisions in order to insure early patient contact for the student. While the major emphasis in his clinical service is placed upon medicine, surgery, and gynecology and obstetrics, sufficient time is allotted in the dispensary and wards to acquaint the student with specialized technics. These are made a part of student training in order to impress upon the student their role in the consideration of the patient as a clinical problem. Clerkships in clinical medicine are given in the junior year. This change was effective for the academic year 1940-1941. Besides out-patient and ward services there is offered a formal course of lecture and laboratory of forty-eight hours in toxicology and anesthesiology, administered by the department of pharmacology and therapeutics; a course in regional anatomy, administered by the department of anatomy in association with the department of surgery.

The Senior year is devoted almost entirely to clerkships with considerable time devoted to service in the Admission Clinic, the Medical Clinics and Clinical Laboratories of the Out-patient Department. These clerkships are enhanced by seminar meetings held daily with the senior attending staff at Mercy Hospital and Cook County Hospital.

In the senior year the student must spend one week in clerkship on contagious diseases and two weeks in psychiatry. Attendance at autopsies is required in the sophomore, junior and senior years.

Training in obstetrics is available to students in the out-patient department and wards of the Mercy Hospital and Lewis Memorial Maternity Hospital. The didactic work of the junior year is carefully integrated by instruction to the entire class at one time, and the same is true during the



Loyola University  
SCHOOL OF DENTISTRY

senior year. Before entering upon his out-patient service the senior must serve an observation clerkship in the wards of the affiliated hospitals, a gynecological clerkship at the University Hospital or Cook County Hospital, two weeks intensive instruction in manikin technique and three weeks in prenatal clinics.

### Peace-Time Research

A review of medical research of the Loyola University School of Medicine reveals that experimental scientists have turned from war-time research and are now busily engaged in peace-time problems. Several projects are started and many more are being planned in widespread fields, including those of public health, industry and aviation medicine.

The Department of Experimental Medicine is headed by Dr. Julius Sendroy, Jr., who, during the war years, developed a sensitive method for the detection of carbon monoxide gas in low concentrations. In civilian life it is well known that carbon monoxide poisoning results mainly from accidents with illuminating gas or in garages. What is less known is that it is also a serious hazard in various industries, in naval craft and in aviation. A pilot at high altitude, for example, may be incapacitated by one-tenth of the concentration of carbon monoxide which would be required to render him unconscious at sea level. At the request of the armed forces, Dr. Sendroy, in collaboration with Edward Fitzsimons, has carried out research on the detection of leaks of carbon monoxide into the airplane cockpits under flight conditions. The method promises to be of general use in industrial toxicology, as well as in future scientific investigations.

The effects of breathing air or oxygen under pressure has been the primary concern of recent investigations by Dr. Theodore E. Boyd, professor, and Dr. John N. Brookhart, former assistant professor of the Department of Physiology. The use of "pressurized" air or oxygen is sometimes beneficial in the treatment of congestion of the lungs, and also in the supplying of oxygen to aviators at high altitudes. "Pressurizing" of the lungs, however, is potentially hazardous, and the Department of Physiology has been concerned with determination of the safe limits of this pressurization under different conditions.

Research in the Department of Pathology has dealt mainly



Loyola University  
SCHOOL OF MEDICINE



with the effects of high voltage x-ray treatment on malignant tumors. This work has been directed mainly toward human cancer, although similar studies were carried out on cancer produced experimentally in animals. These contributions have assisted materially in establishing techniques by which x-ray treatment can be made most effective. This program has been carried on, and is being continued by Dr. John F. Sheehan, Chairman, and Dr. James W. Henry, Vice-Chairman of the Department.

In the Department of Pharmacology, Dr. Rafael Mendez, head of the department, has recently published studies on the mode of action of drugs used in the treatment of heart disease. Dr. Mendez, a distinguished Spanish scientist, left his country in 1938 and spent three years at Harvard University before coming to Loyola. He is at present on a six-month's leave of absence, working at the National Institute of Cardiology in Mexico City.

### Radioactive Minerals

In the Department of Biochemistry, Dr. Wilbur R. Tweedy has for several years been studying the uptake and transfer in the body of mineral substances which enter into the formation of bone. He was among the first to use in this field, the "tracer" technique with radioactive materials. Now that larger supplies of these substances are available, this work will continue on an expanded scale.

Several research projects are being carried out in the Department of Anatomy under the direction of Professor Reuben M. Strong and Professor Thesle T. Job. These projects include a study by Dr. David S. Jones, Assistant Professor of Anatomy on the origin and migration of various nerve cell elements in the embryo.

Dr. George F. Simmons, Assistant Professor of Anatomy, is in the process of conducting experimental work to determine the control of the reproductive cycle and the development and growth of young animals. According to Dr. Simmons, many of the features of the "slow-motion reproduction cycle" in small animals lend themselves well to careful study and the data may be applicable to larger animals or to man.

Also, in the Department of Anatomy, Dr. Arthur J. Gatz, Assistant Professor, is concerned with research on the effects of Vitamin E Deficiency on the heart.

Further research is being planned in several other departments of the medical school. As an example, an experimental project has been initiated by Dr. Harold C. Voris, Clinical Professor of Neurological Surgery, and Dr. R. C. Greenwood, under a grant from the National Cancer Institute. This project will include a study of brain tumors in small experimental animals. The causes, development and different methods of treatment of these tumors will be tested.

Other departments are, at the moment, adding new members to their staffs and are initiating work along pharmacological and bacteriological lines. The potentiality of this expanded research program is due in a great extent to the constant, zealous and inspiring efforts of those scientists at the Loyola University School of Medicine who struggled successfully, and under difficult war-time conditions, to maintain a progressive research program.

### School of Dentistry

On March 12, 1883, forty-three years after the founding of the first institution in Chicago for dental education, the collegiate department of the Chicago Dental Infirmary opened its two small rooms on the third floor of 22 and 24

Adams Street to eighteen prospective dentists. One year later the school was reorganized and renamed the Chicago College of Dental Surgery.

Within the next few years the school moved a number of times, but always remained in the loop.

The foresight of those who founded the institution is seen in the fact that in 1888 they purchased a lot on the corner of Wood and Harrison Streets, with a view to constructing a building in a district which has since become the world's leading medical center. Five years later the building was completed under adverse financial conditions, just prior to Chicago's first world's fair and the great panic of 1893. A loan of twenty-five thousand dollars, supplied by Dr. Nicholas Senn, a distinguished surgeon, was necessary to complete construction.

In 1897 the capacity of the building was doubled by an addition to the south section. By then the college had grown to be the largest institution of its kind in the world.

In 1923, the college, under the advice of the Dental Educational Council, sought a university connection and soon afterwards the officials of Loyola and the Chicago College of Dental Surgery worked out a satisfactory merger.

It is to the credit of the college that there are ten deans of dental schools who were Chicago College of Dental Surgery graduates. The alumni association has over five thousand members scattered over every state in the Union and over all Europe.

### Administration

The officers of administration for the School of Dentistry are: Rev. James T. Hussey, S.J., President of Loyola University; Rev. Robert J. Willmes, S.J., Regent and Student Counselor; Robert W. McNulty, M.A., D.D.S., Dean of the Faculty; Rev. Nicholas H. Mann, S.J., Treasurer; Warren Willman, M.S., D.D.S., Secretary of the Faculty.

The executive Committee includes Dean McNulty; Rev. Willmes and Drs. Albert C. Pendleton, Warren Willman, William S. McNeil, Gustave W. Rapp and Harold W. Oppice.

The Dean of the Faculty is responsible to the President of

*(Continued on page 38)*



University Hospital



# PRESBYTERIAN HOSPITAL

*A PROGRESSIVE INSTITUTION from the time it was founded in 1883 it has served humanity with the best of hospital care and through its affiliation with Rush Medical College has materially contributed to the advance of medical science.*

ONE of the oldest and sturdiest cornerstones of the Medical Center District is the Presbyterian Hospital at the corner of Congress and Wood Streets.

It was founded in 1883, seven years after the Cook County Hospital was moved into the District shortly after the Chicago fire of 1871. Its first building was completed and opened to patients in August, 1884.

As a young and hopeful institution, the hospital was nourished from the beginning by the old Rush Medical College, pioneer medical school of the west, founded in Chicago in 1837.

In fact, Rush Medical College took the initial steps in founding the hospital when the college trustees voted in 1879 to establish a hospital to provide adequate opportunities for clinical instruction of students. Subsequently Dr. Joseph Presley Ross obtained a gift of \$10,000 from Mr. Tuthill King, a member of the First Presbyterian Church. Other donations were obtained and after building was begun, it was decided to ask a group of Presbyterian laymen to form a corporation to take over completion and management of the hospital.

At that time the West Side, on which lived half of Chicago's growing population, had no general hospital except Cook County which was for the indigent only. As the result of a letter sent out by Dr. Ross to a number of prominent Presbyterian laymen, a charter was obtained on July 21, 1883, and the first meeting of the Board of Managers, as designated in the charter, was held in December, 1883.

## Rush Deeds Site

Through an agreement with the trustees and faculty of Rush Medical College, the site and the hospital building on which \$25,000 had been expended were deeded on January 2, 1884 to The Presbyterian Hospital of the City of Chicago, the corporate name of the institution as set forth in the charter. This agreement stipulated that the medical staff of the hospital should be nominated by the college and that the faculty should have sole control of all clinical instruction in the hospital. This arrangement proved entirely satisfactory to both the college and the hospital. It established a precedent followed later by a number of other institutions.

Through this affiliation with Rush Medical College, the progress of the hospital as an educational unit was intimately

connected with that of the college. Rush was chartered by the State of Illinois in 1837, a few days before the charter incorporating the City of Chicago was granted. It maintained an undergraduate medical school from 1843, when the first class entered, until 1942. The college, founded mainly through the efforts of Dr. Daniel Brainard, was named for Dr. Benjamin Rush of Philadelphia, a pioneer in American medicine and a signer of the Declaration of Independence.



LESLIE D. REID  
Superintendent

WILLIAM G. HIBBS, M.D.  
Medical Director

Rush Medical College was affiliated with the University of Chicago in 1898 and in 1924 became an integral part of the University. The first two years of the medical course was transferred to the southside campus. Clinical teaching of third and fourth year students was continued in the westside college buildings and in Presbyterian Hospital.

The desire of the University to have its own medical school on the Midway and the wish of the Presbyterian Board of Managers to continue the service of the Presbyterian Hospital to the medically indigent on the West Side were among the factors which led to the decision of the University in 1940 to discontinue teaching at Rush and to the separation of Rush from the University of Chicago, with termination of the Hospital-University contract.

The Rush Medical College Board of Trustees was reconstituted at that time and reacquired the college facilities which then were leased to the hospital. Certain college endowment funds also were reacquired by Rush Trustees and the income is being used for medical research.

## Century of Teaching

During its century of undergraduate medical teaching, Rush College graduated 10,976 physicians and surgeons who have cared for the sick in all parts of the world. Numbers of them have become teachers in medical schools and have occupied other prominent positions in their communities and as leaders in local, state and national professional organizations.

On July 1, 1941, the Presbyterian Hospital established a teaching affiliation with the University of Illinois, and members of the faculty of Rush Medical College who remained on the hospital staff joined the medical faculty of the University as "Rush" professors and instructors. Others who have since joined the hospital staff were or have become



members of the faculty of the University of Illinois School of Medicine.

Under the new affiliation, Presbyterian Hospital took over the Central Free Dispensary and has continued to operate it as an out-patient department for the medically indigent.

Incorporated in 1873 as the Central Free Dispensary of West Chicago, the dispensary was the outgrowth of the Brainard Dispensary, established in 1867, and the Herrick Dispensary, established shortly after the Chicago fire of 1871. Soon after its incorporation the Central Free Dispensary became affiliated with Rush Medical College as a clinical teaching center staffed by the college faculty. Through this affiliation, the dispensary continued the work begun by Chicago's first free medical dispensary, opened in 1839 by Dr. James V. Z. Blaney in his office, taken over by Rush Medical College in 1843 and operated by the college in various locations through the years.

When Rush Medical College completed its first building in 1876 on the new West Side site at the corner of Harrison and Wood Streets, Central Free Dispensary was housed on the first floor. Following erection of the Senn Memorial building in 1903, the dispensary moved into the quarters which it still occupies in that building.

Another institution closely allied with Rush Medical College and Presbyterian Hospital was the John McCormick Institute for Infectious Diseases, founded in 1902 by Mr. and Mrs. Harold F. McCormick.

Directed by Dr. Ludvig Hektoen, the John McCormick Institute was the locale of extensive research concerning the cause and prevention of infectious diseases. Here Drs. George and Gladys Dick developed methods of diagnosis and immunization against scarlet fever. Others, including Dr. Hektoen, made notable contributions to the medical knowledge as the result of work done at the Institute. Originally housed on the first floor of the Rush laboratory building on the south side of Harrison Street, the Institute later erected its own laboratory building and the Durand

Hospital on Wood Street. Several years ago the Institute was taken over by Cook County Hospital.

When Rush Medical College affiliated with the University of Chicago in 1898 through the efforts of President William Rainey Harper and Dr. Frank Billings the Rush Library was established, first on the upper floor of the Rush Dental building at the southeast corner of Harrison and Wood Streets. Later it was moved to the original Rush building on the present site of the Rawson building, and since the completion of the latter in 1924 has been housed on its first floor. Ranking as one of the best medical libraries in Chicago, it is now maintained by Presbyterian Hospital.

### School of Nursing

Within the second year of its existence it was deemed advisable to place the nursing service in the hospital under the supervision of the Illinois Training School for Nurses. With the exception of a short interval during which the hospital operated its own school, this arrangement continued until 1903 when the present School of Nursing was organized.

A building at the corner of Ashland and Congress was used as the nurses' residence until 1913, when the eight story Sprague Home was erected directly across Congress Street from the hospital as a memorial to Otho S. A. Sprague and Albert Arnold Sprague. Extensive remodeling, refurnishing and other improvements made in 1941 added greatly to the attractiveness and usefulness of this building which provides classrooms and other teaching facilities as well as residence quarters for 300 student and staff nurses.

Including the class of 1947, nearly 1,900 students have been graduated. Among these are many who hold positions of great responsibility in nursing and related fields.

The School of Nursing is accredited by the Illinois State Department of Registration and Education and is registered with the Board of Regents of the University of the State of New York. It is also accredited by the National League of Nursing Education. Through recent affiliation agreements with several colleges, students may obtain Bachelor of Science degrees on completion of four to six semesters of academic work in College preceding the nursing course.

Graduate nurses on the school faculty and the nursing staff of the hospital and the outpatient department number 142. In addition, 23 men orderlies and 61 nurses' helpers are employed. Other professional and non-professional employees total 499, making an employed staff of 725 in all departments of the hospital. Supplementing the work of this staff are an average of 250 student nurses and 80 women volunteers, the latter giving from three to six hours each, weekly, as hospital aides, ward and clinic secretaries, and in other types of service.



Presbyterian Hospital—established in 1883

(Continued on page 41)



## COOK COUNTY

# GRADUATE SCHOOL OF MEDICINE

*ATTENDANCE — 2,500 doctors take post-graduate courses here each year. Special courses under eminent staff physicians of the Cook County Hospital bring the latest scientific developments in medical techniques and methods of treatment to doctors from all parts of America and abroad.*

**Y**EAR by year Cook County Hospital has increasingly become a focal point where practicing physicians from all over the world have come for post graduate study. New ideas and new techniques are put in practice here as soon as they are approved for general utility. Researchers in the Medical Center District are constantly delving into new theories for the causes of disease, exploring the effects of newly developed drugs.

In 1932 members of the attending staff concluded that the most efficient way of relaying new information and developments in the practice of medicine to all practicing physicians for the benefit of humanity was to establish a graduate school where such information could be imparted according to prescribed courses through appropriate scholastic teaching.

The Cook County Graduate School of Medicine was incorporated October 1, 1932. Its facilities are available to all graduate physicians in good standing. The faculty consists of members of the attending staff of the Cook County Hospital. The school is located in its own building, 427 S. Honore St., about a block from the main entrance to the hospital. Plans have been completed, however, for a magnificent new building to be erected at the southeast corner of Wood and Flournoy Sts., directly across the street from the Cook County Children's Hospital.

A general statement published by the School says in part:

"This institution (*Cook County Hospital*) is known the world over as the largest general hospital of its kind. It offers almost unlimited clinical facilities for graduate study in medicine and all of its divisions.

"We realize that only upon the foundation of a thorough training in the science and art of medicine can one build with safety and certainty the superstructure of a successful medical career. The knowledge acquired in the early studies of the fundamental medical sciences must be supplemented by a substantial practical training such as can be realized where opportunity is offered for the adequate study of a large amount of clinical material. The Cook County Graduate School of Medicine, by its affiliation with the Cook County Hospital with its 3,300\* beds, offers opportunities for the study of all types of medical and surgical cases.

"The programs include courses of instruction and demonstration which give effective training to the general surgeon, to the general practitioner of medicine and to the specialist.

Special courses in internal medicine are offered. Special surgical courses are given to those who have been in actual practice of surgery and who desire to review anatomy, physiology, pathology, diagnostic methods and become more

proficient in the standard surgical procedures. Instruction is given by practicing physicians who are in daily contact with medical and surgical problems and who are thus fitted to give the student practical suggestions and demonstrations. Work in the medical courses is given in clinics, clinical laboratories, in the wards and outpatient departments. In general surgery and in surgical specialties instruction is given in the dissection room, pathological laboratories, in the operating rooms,

wards and outpatient departments.

"It is the aim of the faculty to give the physician a review of the basic sciences as they apply to daily problems in medicine and surgery, but above all it offers to the student courses which are both comprehensive and practical."

Following are the members of the Board of Trustees:

Frederick Tice, M.D., Chairman  
Karl A. Meyer, M.D., President  
Italo F. Volini, M.D., Vice-President  
Raymond W. McNealy, M.D., Secretary-Treasurer  
Aaron Arkin, M.D., Editor  
James J. Callahan, M.D.  
John B. O'Donoghue, M.D.  
Wm. F. Moncreiff, M.D.

The various divisions and their chairmen are listed as follows:

**Medicine**—Italo F. Volini, M.D.; **General Surgery**—Karl A. Meyer, M.D.; **Gynecology**—Aaron E. Kanter, M.D.; **Obstetrics**—A. J. Kobak, M.D.; **Fractures and Traumatic Surgery**—George Apfelbach, M.D.; **Orthopaedic Surgery**—F. G. Murphy, M.D.; **Urology**—William J. Baker, M.D.; **Dermatology**—Theodore Cornbleet, M.D.; **Oral Surgery**—Joseph E. Schaefer, M.D.; **Ophthalmology**—William F. Moncreiff, M.D.; **Otolaryngology**—Samuel J. Pearlman, M.D.; **Pediatrics**—Abraham Levinson, M.D.; **Tuberculosis**—Ellis B. Freilich, M.D.; **Roentgenology**—George Landau, M.D.; **Physical Therapy**—Disraeli Kobak, M.D.; **Neurology**—Ben Lichtenstein, M.D.; **Anaesthesia**—F. M. Grem, M.D.

(Continued on page 40)

\* 3,400 beds, according to A.M.A. 1947 listing.



FREDERICK TICE, M.D.  
Chairman



KARL A. MEYER, M.D.  
President



The

# CHICAGO MEDICAL SCHOOL

*YOUNG and ambitious this School has struggled through adversity and is now engaged in a comprehensive program of instruction and medical research.*

THE CHICAGO MEDICAL SCHOOL is located in the Medical Center District at 710 S. Wolcott Avenue. While it may not be as large as some other medical schools in Chicago its policy is to provide adequate and acceptable training to each individual student. It operates as a non-profit corporation.

Unlike many medical schools of today, founded on the roots and traditions of old established institutions, The Chicago Medical School started from scratch when it was incorporated in 1912 as "The Chicago Hospital College of Medicine." It then opened its doors at 3832-34 Rhodes Avenue as a night medical school to provide professional training especially dedicated to those ambitious students who were obliged to earn their livelihood by day.

Seven years after its founding, the name of the institution was changed to "The Chicago Medical School." Experience was beginning to show that teaching by night to students, already fatigued by a full day's work, taxed the limit of human endurance and capacity of mental assimilation. For eight more years the School carried on, teaching by night. It was a losing battle. The spirit was willing but the flesh was weak. To acquire the medical education demanded by modern professional standards was demonstrated to be a full time job.

## Becomes Day School

This handicap compelled the School to drop its efforts to operate a night program and in 1927 the governing body inaugurated its broadened facilities to a day school. This change in policy marked a turning point where the school began to show decided progress. The management became concerned for larger quarters nearer the hospitals for clinical study. The next step was to take over the old Frances Willard Hospital building in the Medical Center District in 1930. Here the School building housed laboratories, classrooms, library, museums and an outpatient department for care of the poor.

Administration of The Chicago Medical School is directed by a Board of Trustees of whom Lester N. Selig is chairman; The Reverend John C. Evans, vice-chairman; Dr. Henry A. Smith, secretary, and Augustus E. Olson, treasurer.

On the administrative staff are: John J. Sheinin, B.S., M.S., Ph.D., M.B., dean; Bruce W. Dickson, B.A., M.A., registrar; and John C. Dinsmore, Ph.B., business manager. The dean is appointed by the Board of Trustees.



DR. JOHN J. SHEININ  
Dean, Chicago Medical School

Personnel of the School includes 212 faculty members, 30 administrative, clerical, technical and other non-academic persons, and approximately 300 students—a total of 542.

Services rendered at the Chicago Medical Clinic Dispensary average 93 visits per day and cover such cases as dermatology and syphilology, E.N.T., eye, gynecology, medicine—allergy, arthritis cardiology, endocrinology, gastrointestinal, metabolic, tropical medicine and others—neurology, obstetrics, pediatrics, general medicine, psychiatry, and surgery—orthopedics, proctology, varicose veins, urology, and X-ray.

A staff of 212 teaches 109 courses. The basic science departments teach anatomy, physiological chemistry, physiology, pharmacology and therapeutics, pathology, bacteriology, parasitology, and preventive medicine (public health). The clinical departments teach medicine, pediatrics, general surgery, genito-urinary surgery, orthopedic and traumatic surgery, gynecology, obstetrics, ophthalmology, otolaryngology, neurology, dermatology, psychiatry, and those subjects previously listed in the dispensary.

Clinical facilities include Cook County Hospital, Mount Sinai Hospital, Chicago State Hospital, Municipal Tuberculosis Sanitarium, Municipal Contagious Disease Hospital, Oak Forest Infirmary and Hospital, and the Chicago Medical Clinic. Clerks representing third and fourth year students, spend most of their time in the hospitals and dispensary.

Entrance requirements to The Chicago Medical School are four years of high school, or its equivalent, and not less than two years' credit in an approved college of arts and sciences. The Committee on Admission passes on applications through the registrar.



CHICAGO MEDICAL SCHOOL



Following are some of the projects now conducted in the School's research laboratories:

## DEPARTMENT OF ANATOMY

### Gross Anatomy

1. A study of the delicate structures which constitute the framework of our body. By using a new cross-section technic and with the help of photography many of the accepted data on the organization of the connective tissue have been entirely revised. A better knowledge of these structures will be of great value to the surgeon in improving operative technics.

2. A study of the branches of the axillary artery which carry blood to the shoulder and arm. The results will be compared to data on the Siamese and Chinese obtained while Dr. Edgar D. Congdon was Rockefeller professor at the National University of Siam in Bangkok before the war. In addition, a statistical anthropological study is being made of the body measurements of 1500 Siamese young men, also obtained by Dr. Congdon in Bangkok.

### By Dr. Leon H. Strong:

1. Embryology of the vascularization of the neural tube.
2. Functional analyses of the naso-pharynx, especially naso-pharyngeal closure.
3. Micro-analysis of the mechanism of pitch production in the larynx.

### Microscopic Anatomy

### By Dr. J. M. Essenberg:

1. A study on the healing of sex glands of the rats, damaged by X-ray, following treatment with sex hormones—a study particularly timely in the era of atomic radiation.
2. A study of the effect of nicotine on the ability of rats to learn their way through a maze and to remember what they have learned.
3. The construction of an Embryological Museum, illustrating the development of the human embryo similar to that prepared by Dr. J. M. Essenberg for the Museum of Science and Industry.

### By Dr. George Clark:

I. Work in collaboration with H. G. Birch, Department of Psychology, City College of New York.

#### A. Experiments completed but papers not finished:

1. The mechanism of estrogen induced dominance in the female chimpanzee.
2. Dominance in the spider monkey with some effects of sex hormone therapy.
3. Sex cycle in the chimpanzee.

#### B. Experiments not yet completed:

1. Structures essential for interhemispheric transference of visual habits in the rat.

II. In collaboration with K. S. Lashley, Yerkes Laboratories of Primate Biology, Orange Park, Florida.

- #### A. Visual function after prefrontal ablations in the monkey. The experiments have been completed. Preliminary report at last AAA meeting.

#### III. Independent work:

- A. The lateral geniculate in the spider monkey. Material sectioned and stained and partially studied. Preliminary report to be given at AAA meeting.
- B. The lack of effect of estrogens on the sex skin of the infant male chimpanzee. Experiments completed, abstract complete. To be given at APS meeting.
- C. Threshold bleeding and the sex skin in the castrate female chimpanzee. In press, *Endocrinology*—carries present address, Chicago Medical School.
- D. Stimulation of the cerebral cortex in the unanesthetized monkey. 12 monkeys studied and material partially written. It is probable that there will be three papers on this work.
- E. The brains from above monkeys are to be sectioned and stained. They will supply material for the following:
  1. Variation in motor cortex of macaque—especial interest will be the variation in extent of subdivisions of agranular cortex—(4 and 6) and in number of Betz cells.

2. Extent and type of variation in selected areas of cortex—especially in areas 10, 3, 18, and 37.
3. Projection of thalamic nuclei on prefrontal cortex.

### By Dr. Harold S. Fish:

1. Effect of nerve section on the taste papillae and epithelium of the rat tongue. (In collaboration with Curt P. Richter.)
2. Circumvallate papillae of the fetal tongue: A study of the differentiation and growth of these papillae and their related glands from their first appearance (about 10 weeks) through the full term fetus at weekly intervals.
3. Foliate papillae: A study of the differentiation and growth of these papillae and their related glands from their first appearance (about 10 weeks) through the full term fetus at weekly intervals.
4. Fungiform and filiform papillae: A study of the differentiation and growth of these papillae and their related glands from their first appearance (about 10 weeks) through the full term fetus at weekly intervals.

## DEPARTMENT OF MICROBIOLOGY AND PUBLIC HEALTH

### By Dr. Irwin S. Neiman:

1. A study of the value of the Bacillus of Calmette and Guérin (B. C. G.) as a vaccine against tuberculosis—the B. C. G. is a tuberculosis bacillus specially treated so that it cannot produce disease, but can still build up body resistance against the more virulent forms. The work is being done in cooperation and is supported by the Municipal Tuberculosis Sanitarium.

2. A study of specific antibodies which seem to be present in the blood of allergic rabbits. The purpose of the work is to see if the depression of these antibodies will result in an improvement of allergic symptoms.

3. The ability of streptomycin to eradicate tuberculous infection and its effect on immunity to tuberculosis.

### By Dr. George J. Scheff:

1. Relation of the Heterophile Antigen to combined infections.
2. The use of the collodion particle technique in Immunology.

### By Dr. Ernest Hartman:

1. The incidence of histolytica *Endamoeba* in the general population.
2. The effect of penicillin on *Endamoeba histolytica*.

### By Dr. Paul Kopper:

1. A study of the destruction of creatinine by certain bacteria. The purpose is to develop a method for the analysis of creatinine, an important by-product of digestion and muscle activity.
2. An investigation into the potentialities of a new bacteriocidal agent derived from *Pseudomonas aeruginosa*.

## DEPARTMENT OF PHYSIOLOGY AND PHARMACOLOGY

### By Drs. Andrew Ryan and Leonard B. Nice:

1. A study of the reactions of the sympathetic nervous system under nervous stress and its relation to health and fitness. The sympathetic nervous system regulates heart rate, blood pressure, blood sugar and has other important functions which make it possible for the body to meet many emergencies in the struggle for existence, in combat duty and during fatigue. The work is conducted on volunteer medical students.

### By Dr. Andrew Ryan:

1. A study of the effect of stimulating and quieting drugs on the reactions of the sympathetic nervous system to standardized stimuli.

### By Drs. Piero P. Foa and Jay A. Smith:

1. A study of the utilization of Vitamin B1 by the diabetic and its relation to insulin. It is hoped that from these studies there will be derived a better understanding and a better treatment for the severe pains which torment many diabetics, and that there will evolve a

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## WEST SIDE

# PROFESSIONAL SCHOOLS YMCA

*THE "Y" serves many social, cultural and recreational needs of students, staff and other employees of Medical Center District institutions. It provides housing for four hundred students.*

WHILE located just outside the legal boundaries of the Medical Center District, the Professional Schools branch of the Young Men's Christian Association, at 1804 West Congress Street, is devoted entirely to serving the staff and employees of District institutions.

The present building was erected in 1925 and for more than twenty years has furnished housing and recreational facilities, and has been a center for extra-mural activities of both employees and staff members employed in District hospitals and other institutions. Its original cost was almost \$1,000,000.00 and the building has been well maintained.

The Board of Directors includes J. E. Millizen, chairman, University of Illinois; Dr. T. T. Job, Loyola University; Dr. Arthur E. Diggs, Presbyterian Hospital; Miss Lydia Brickbauer, C. C. Nursing School; Dr. W. A. Diman, Second Baptist Church; E. H. Mueller, V. Mueller Co.; Harry W. Pearce, University of Illinois; Dr. Howard M. Sheaff, Presbyterian Hospital; William M. Fowler, Chicago Dietetic Supply; Miss Lida Jamison, Chicago Dietetic Supply; Dr. John M. Spence, University of Illinois; Dr. J. J. Sheinin, Chicago Medical School; Dr. Harry Oberhelman, Physician; Dr. W. I. McNiel, Loyola University; H. M. Gibson, Gibson Electric Co.; Dean E. R. Serles, University of Illinois; Harold Herman, College and University Business Magazine; Dr. Edgar Coolidge, Dentist; Dr. H. Worley Kendell, University of Illinois; George F. Manzelmann, President, North American Accident Insurance Company. E. W. Ruehrwein is Executive Secretary.

This particular YMCA came into being as a result of urgent appeals on the part of medical institutions to the YMCA of Chicago, describing the urgent need for adequate housing for young men in this district. In the year 1924, Dr. Truman W. Brophy, Dean of the Chicago College of Dental Surgery, offered to contribute \$50,000 toward such a project. Gifts by faculty members and students of various institutions brought the total from that source to \$120,000. This sum, though not large enough to provide a building, was eloquent evidence of the belief in such an enterprise by those who were nearest to the student body and best acquainted with their need.

The more than 300 rooms in the Y's Professional Schools Branch today house approximately 400 men and women. Its housing facilities are the only ones in the District which were especially built to house medical students and doctors. While these housing facilities have been fully used since inception of the organization, they are particularly important in today's acute housing shortage and were especially appreciated during the war and post-war years. No one institution could provide the considerable amount and variety of modern housing needed in and near the Medical Center District. Plans are now being brought to the attention of insurance companies, mortgage bankers, and builders

for the development of additional housing, particularly that calculated to meet the needs of families of institutional staff and personnel. In the meantime, the splendid efforts of the YMCA have been supplemented by the Medical Center Commission through the reconditioning of older properties which the Commission has purchased but which are not as yet definitely scheduled for demolition.

Physical recreation facilities at the YMCA include a large gymnasium, hand ball courts, exercise rooms and the service of a masseur. Comfortable lounges, private dining rooms and a pleasant cafeteria provide additional recreational facilities, and are much in use by both men and women.

The present building of the West Side Professional Schools YMCA lies in the path of the Congress Expressway and is scheduled for demolition, perhaps within the next few years. A committee has been appointed by the YMCA to explore relocation possibilities within the District itself.

The need for continuing services such as the YMCA has provided in the past, is fully recognized by the institutions which it serves and they are exerting their influence to make sure that its services continue and in an increased degree, if possible.



Professional Schools YMCA



## Services of the District

(Continued from page 5)

in such housing units as are suitable that have been acquired in the land assembly. Such living quarters are available only to persons or families identified with institutions in the district.

Following are listed the various services and their functional units, which combine to make the Medical Center District known throughout the world:

**Cook County Hospital**, 1825 W. Harrison St., 3,400 beds (A.M.A. Hospital Register, 1947). Grouped as units of the Cook County Hospital are the General Hospital and Administration Building, Children's Hospital, Children's Annex, Men's Ward, Contagious Diseases Hospital, Tuberculosis Hospital, Psychopathic Hospital, Fantus Outpatient Clinics, Hektoen Institute, Durand Dormitories, Institute of Legal Medicine, and the Cook County Nurses' Home and School.

**University of Illinois**, 1853 W. Polk St., professional colleges and hospitals. On the campus of the University are these units — College of Medicine, College of Dentistry, College of Pharmacy, Research and Educational Hospitals, including the General Hospital with its 240 beds, the Illinois Surgical Institute for Children with 120 beds and the Outpatient Clinic.

**Illinois Department of Public Welfare**, (in cooperation with the University). Illinois Neuropsychiatric Institute with 150 beds, Illinois Eye and Ear Infirmary (outside of District), and the Institute for Juvenile Research.

**Illinois Department of Public Health**, bacteriological laboratories at 1800 W. Fillmore St. make tests and prepare serum for distribution throughout the state.

**Loyola University**, School of Medicine, 706 S. Wolcott Ave. School of Dentistry, 1757 W. Harrison St.

**Presbyterian Hospital**, 1753 W. Congress St., General Hospital, Central Free Dispensary, Research Laboratories, Presbyterian School of Nursing and Sprague Home for Nurses.

Other medical institutions located in and adjoining the District are: **Chicago Medical School**, 710 S. Wolcott Ave.; **County Graduate School of Medicine**, 427 S. Honore St.; **University Hospital**, 432 S. Wolcott Ave.; **Cook County Bureau of Public Welfare**, 739 S. Winchester Ave.; **Cook County Department of Public Health**, 737 S. Wolcott Ave.; and **Juvenile Court and Juvenile Detention Home**, Ogden Avenue and Roosevelt Road.

Many of the District institutions are an outgrowth of schools and hospitals established in the area in earlier years. Among these could be cited the **Rush Medical College**, which for generations was the leading medical school of the midwest. In its gradual absorption by other institutions of more recent date it became affiliated with the University of Chicago and, currently, with the University of Illinois. Rush was a powerful factor in the establishment of the Presbyterian Hospital, contributing ground and cash toward the establishment of this hospital. Other agencies contributing to the early fame of the District as a medical center were the **College of Physicians and Surgeons of Chicago**, the **Chicago Medical College**, and the old **West Side Hospital**.

## Loyola University

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Loyola University. All activities of the School are further coordinated by the Regent.

There are 100 first year undergraduate students registered in the School of Dentistry for 1947. The departments for study are: Physiological Chemistry, Histology and Embryology—General and Dental, Anatomy, Dental Anatomy, Prosthetic Technology, Dental Materials, Orientation and Ethics.

Second year undergraduate students total 52; departments for study are: Pathology, Bacteriology, Physiology, Materia Medica, Public Health, Crown and Bridge Technology, Orthodontia, Full Prosthesis, Denture, Operative Dentistry, both Therapeutic and Oral Hygiene, and Ethics.

Third year undergraduate students total 78; departments for study are: Dental Therapeutics, Radiology, Prosthetic Dentistry I, Diagnosis and Planning, Operative Dentistry I, Oral Hygiene, Technical Composition, Special Pathology, Dental History and Jurisprudence, Ethics and Social Relations, Principles of Surgery, Anesthetics, Exodontia, Crown and Bridge Prosthesis I, Orthodontia I, Removable Bridge Technic, Partial Denture Construction, Ceramics, Dental Clinic, Ethics and Pharmacology.

Fourth year and post graduate students total 28. The departments for study are: Operative Dentistry II, Prosthetic Dentistry II, Orthodontia II, Oral Surgery and Physical Diagnosis, Therapeutics, Crown and Bridge Prosthesis II, Economics, Partial Denture Construction, Principles of Medicine, Technical Composition, Dentistry for Children and Dental Clinic. The enrollment for 1946-47 totals 258.

## University Hospital

University Hospital, located on the border of the District, has been operating for more than a quarter of a century. The late Dr. Marshall Davison, and his father before him, who for many years directed the hospital, spent their lives in the service of healing, and the University Hospital stands as a monument to their devotion.

Its one hundred beds have served almost 100,000 patients. Its surgical operating rooms, X-Ray Department, Clinical Laboratory, Pharmacy and other adjuncts have been important aids in treating those patients and its nurses have been housed in the connecting residence.

When the selection of the route for the Congress Expressway was made public, it appeared that the University Hospital building would have to be moved or torn down. Pending that eventuality the building was leased in 1947 to Loyola University for interim use as a teaching hospital. The University Hospital is now being reequipped and reorganized and will be a key 145 bed teaching and research hospital for Loyola University. L. F. Grapski is the Administrator and Dr. Charles J. Thill the Medical Director. The teaching faculty of the School of Medicine will constitute the Staff.

Thus, even the death of its owner and chief supporter has not cut off the service this institution renders. It is anticipated that in the ultimate plan some way will be found to carry on this outstanding tradition.



## Illinois State Department of Public Welfare

(Continued from page 14)

changed to the Institute for Juvenile Research. In 1930, Dr. Paul L. Schroeder, chief of the psychiatric service, became superintendent and has remained in that capacity up to the present time (1947).

### State-Wide Service

Functions of this Institute have become state-wide. However, it serves mainly as a diagnostic and therapeutic center for the children of the Chicago area. Others throughout the state are served by traveling clinics working out of Chicago.

There are 10 full-time psychiatrists on the staff who work under the supervision of an acting director. Others on the staff include two part-time psychiatrists, one "Fellow", 11 full-time psychologists, two students, 10 full-time and two part-time psychiatric social workers, and 32 students from schools of social service.

Services are restricted to children under 18 and they may be referred to the Institute by any Court, social agency, school, parent or guardian in Illinois. Parents referred 53.6 per cent of the cases during the past year while the Courts, next largest in proportion, referred 20.4 per cent.

The Institute examines more than 3,000 new cases a year and sees an equal number of former cases. When the Institute came under state direction in 1917 the policy was to accept only those cases which lent themselves to research into children's problems. However, as the demand for its services increased rapidly and as the staff believed no child with a problem should be turned away, the function of the Institute came to be a general diagnostic one.

The educational program has been conducted largely through the training of graduate students in psychiatry, psychology and social work, who take their field work at the Institute. More than 200 Masters' theses have been written by these students under Institute supervision using the material in the Institute's records.

Many professional workers sent by their state or country spend periods of varying length at the Institute for short courses of orientation to its work. Most of the States of the Union have been represented by these workers and the foreign countries from which others have come are: Poland, Australia, Esthonia, Japan, Russia, Sweden, India, Roumania, New Zealand, England, France, Scotland, Latvia, Switzerland, Norway, Holland, Austria, Germany, Turkey, and Finland, as well as the South American countries and Canada.

By formal agreement entered into in 1932 between the University of Illinois and the Department of Public Welfare the Institute is established as an organic part of the University of Illinois Hospitals. The agreement states: "The entire personnel shall be appointed by agreement of the Department and the University. The director shall be appointed by the Department on the nomination of the University."

### Illinois Eye and Ear Infirmary

Although not located in the Medical Center District, the Illinois Eye and Ear Infirmary by legislative enactment of 1943 became an important unit of the University of Illinois Hospitals. The Infirmary is located at 904 W. Adams St. The Department of Public Welfare owns and operates the

building, the University of Illinois furnishes the professional staff and the nursing staff.

University department heads of Ophthalmology (eye) and Otorhinolaryngology (ear, nose and throat) serve in the same capacity for the Infirmary. There are 95 Academic and 9 non-Academic personnel from the University identified with the Infirmary. The Department of Public Welfare employs 83 non-Academic persons. There are 38 on the nursing staff.

The Illinois Eye and Ear Infirmary was founded in 1858 by a group of doctors. In 1870 it was transferred to the State of Illinois. The original building was destroyed by the great fire of 1871. The building now in use was built shortly thereafter, and added to in 1933.

## The Chicago Medical School

(Continued from page 36)

deeper knowledge of how the body utilizes carbohydrates, such as sugar and starch.

2. A study of the liver function in diabetes and of the benefits derived from the use of Choline, a member of the family of vitamins known as the B-Complex.

### By Dr. Piero P. Foa:

1. A study of the effect of Choline on the lipid fractions of the central nervous system.

2. A study of the possible role of Ferritin in cyanide poisoning.

### By Dr. Jay A. Smith:

1. A study of the toxic effects of large doses of Vitamin B1 on heart and respiration, to understand the pharmacological action of Vitamin B1.

2. A study of the combined action on the heart and on the electric currents generated by the beating heart, of drugs commonly used in heart disease, such as digitalis, caffeine (ordinarily found in coffee) and other drugs similar to caffeine.

## DEPARTMENT OF PHYSIOLOGICAL CHEMISTRY

### By Richard G. Roberts:

1. A study of the chemical properties of various hormones, such as insulin (secreted by the pancreas) and epinephrin (secreted by the adrenal glands) and of certain drugs, such as the South American Indian arrow poison, curare. The study is carried on by the use of modern technics such as bio-assay and spectroscopy.

2. A study of the physiological significance of creatine and creatinine, two substances which are by-products of animal digestion and muscular machine.

### By Dr. Howard H. Beard:

1. A study to develop a test for the early diagnosis of cancer using the urine of suspected patients.

### By Dr. Leo J. Sidel:

1. Study of reaction of the protein molecule.

A. In non-aqueous media.

1. For the elucidation of the structure of the protein molecule itself.

2. To seek correlations between reactions and changed biological activity. The plan of attack is (a) to determine degree of solvolysis during various treatments and (b) to hydrolyze products after treatment in order to determine amino acid content or, if possible, the organic structure of some of the hydrolytic products.

B. Attempt to devise methods of analysis for asparagine and/or glutamine in the intact protein molecule. It is hoped that some specific reaction with the amino acid residue will lead to determinable compounds. Such methods, if found, may be used in metabolic studies of tissue proteins.



## ***The University of Illinois***

*(Continued from page 9)*

Latest available reports show that 420 undergraduate students are taking the courses at the College of Dentistry. A total of 124 instructors teach Anatomy, Applied Materia Medica and Therapeutics, Bacteriology and Public Health, Biological Chemistry, Dentistry for Children, Histology and Embryology, Jurisprudence, Medical and Dental History, Medicine, Operative Dentistry, Oral and Plastic Surgery, Orthodontia, Pathology, Physiology, Crown and fixed Dentures, and Radiology.

## **College of Pharmacy**

A CENTURY ago most pharmacists obtained their skill and professional standing as apprentices. It took them four years to serve their apprenticeship. In 1852 there were only three institutions that taught the profession. They were the colleges of pharmacy of New York, Maryland and Massachusetts. In that year the American Pharmaceutical Association was organized with the primary object to promote "the advancement of pharmaceutical knowledge and the elevation of the professional character of apothecaries and druggists throughout the United States."

Attending the sixth annual convention of this association four elected members were present from Chicago. Two of these members, E. O. Gale and James D. Paine, returned to Chicago inspired with a zeal to launch a college of pharmacy here.

Their proposals were well received. On February 26, 1859, the Chicago College of Pharmacy was organized and incorporated. That was the beginning of the College of Pharmacy, now one of the three professional colleges of the University of Illinois.

The early years were tenuous and during the Civil War the college was practically suspended. But in 1867 a new constitution and by-laws were adopted. Lecture courses were underway with assistance from the faculty of Rush Medical College when the college and equipment were wiped out by the great fire of 1871. In common with the general spirit of reconstruction manifested throughout the city members of the college made immediate plans to rebuild. They appealed to pharmacists throughout the country for equipment to set up new teaching quarters. The appeal was published in the *Pharmacist*, a publication originated by the college.

Response to this appeal came from all over the world, pharmacists of Great Britain proving especially generous. Books, apparatus, supplies and money came in surprising quantities. A new building for the college was erected at the corner of State and Polk Streets. It had a lecture hall to accommodate 600. The college prospered until the end of 1886 when dissention developed as to policies. This resulted in a split whereby part of the staff became affiliated in a new dental college organization inaugurated at Northwestern University.

Discouraging times followed with part of the faculty of

the old school anxious to establish an affiliation with another university. Lake Forest University was proposed but the trustees could not agree unless there could be an affiliation with the State university. Other members of the faculty joined the Northwestern School of Pharmacy.

After this a new faculty was organized. Summer sessions were discontinued and the school year was lengthened to seven months. A revival of prosperity returned with the Columbian Exposition (1893) and school attendance reached 225. An exhibit by the students was shown at the Exposition. There was a continued urge to bring the college under the aegis of the University of Illinois. Overtures were made to President Draper and the trustees of the University with the result that on May 1, 1896, the College of Pharmacy became a part of the University of Illinois.

It was not until 1915 that the University brought the pharmacy college to the Medical Center District. Buildings for this purpose were purchased at 701 to 707 South Wood Street. Two years later the Northwestern University School of Pharmacy was merged with the University of Illinois School of Pharmacy, thus uniting the rivals of 31 years. The name was changed from "School" to College of Pharmacy in 1932, when the curriculum leading to the degree of Bachelor of Science in Pharmacy was announced. It was brought into the Medical and Dental College laboratories building in 1939-40, administered under one executive dean.

Student enrollment as of 1947 was 374. Courses are provided in Accounting, Bacteriology, Botany, Chemistry, English, Hygiene, Languages, Mathematics, Pharmacognosy, Pharmacology, Pharmacy, Physics, Physiology and Zoology.

Admission to the College of Pharmacy is open to qualified high school graduates who have been in the upper third of the class and are passed upon by the Pharmacy College Committee of Admissions. On completion of the fourth year the student receives a diploma and is qualified to take the examination for Registered Pharmacist. Dr. Earl R. Serles is dean of the college.

## ***Cook County Graduate School of Medicine***

*(Continued from page 34)*

Approximately sixty courses will be offered this year (1948). Courses extend from a few weeks to one year, varying with the course. The programs are presented with the cooperation and approval of the Department of Graduate Medical Education of Northwestern University Medical School.

All doctors in good standing in their local medical society are eligible to attend the Cook County Graduate School. Professional people interested in refresher and specialties and new subjects have their choice from a varied curriculum.

In the course of a recent interview James F. Askin, Registrar, made note of the fact that, "there are 110,000 practicing physicians in the United States. Of this number 25 per cent have either served at the Cook County Hospital, or have taken courses at the Cook County Graduate School of Medicine." The average attendance at the school during one year runs from 2,200 to 2,500.



## **The Presbyterian Hospital**

*(Continued from page 33)*

The Presbyterian Hospital is a nonprofit corporation, operated by a Board of Managers consisting of 25 members. The managers are elected by the Hospital Society for four year terms. The administrator is appointed by the Board. The Woman's Board is a strong voluntary organization representing most of the Presbyterian churches of the Chicago area and including a general membership of other public-spirited women.

The buildings that make up the present hospital plant cover the block bounded by Congress, Wood, Harrison and Hermitage Streets, with the nurses' home and school building on the north side of Congress, and the Rush Laboratory building on the south side of Harrison Street. Through extensive remodeling carried out since 1941, many of the departments in the hospital have been enlarged, modernized and relocated.

### **Facilities Expanded**

During the current year, laboratory facilities in the Rush Medical College buildings have been greatly expanded to carry out the enlarged program of teaching and research.

Professional services in the hospital and outpatient department include Medicine, Surgery, Obstetrics, Pediatrics, Neuropsychiatry, Urology, Toxicology, Otolaryngology, Roentgenology, Physiotherapy, Anesthesiology, Ophthalmology, and Dermatology. Staff members for these services total 169. In addition, there are 35 residents in the various specialties and 34 interns in training.

In the course of a year, the hospital provides care for approximately 14,000 bed patients, with a normal capacity of 429 beds and 52 bassinets. Approximately 13% of the patients come from outside the Chicago Metropolitan area. The average daily census runs around 400, with a daily average of 29 free patients not including those whose care is financed by other agencies. Most of these free patients are admitted from Central Free Dispensary, outpatient department of the hospital.

Visits to the 29 clinics of the dispensary totalled 66,564 in 1947, with a total of 8,320 individuals registered. This represents a considerable decrease from previous years and is attributed to the improved economic condition of people generally.

In maintaining an active teaching and research program, the hospital makes an invaluable contribution to medical education and progress, and at the same time assures itself of high quality performance in the care of the sick. The undergraduate teaching program concerns 27 clerks in the surgical wards, 26 clerks in the medical wards, 14 clerks in the Department of Pediatrics, and 14 clerks in the Department of Obstetrics and Gynecology. Clinics are held twice weekly in the North Amphitheater of Senn Hall and many formal lectures are given within the departments for the benefit of the students therein.

### **Research Grants**

During the current year, investigations by special grants-in-aid of research are covering 23 major projects. Some of these projects include clinical study of the effects of the new antibiotic agent, streptomycin; a study of the relations between hypersensitivity to bacteria and acquired immunity; a study of the change that takes place in the cellular elements

of the blood of infants following birth; the use of folic acid in the treatment of anemia; the use of dicoumarol in blood plasma to prevent intravascular blood clotting; study of immunologic aspects of the Rh factor in human blood; a correlation between electrocardiographic findings and pathologic changes in the heart; special aspects of metabolism and growth of premature infants are being studied; an attempt is being made to construct an artificial esophagus; special studies are being made in the treatment of brain injuries; and extensive research is being conducted into the effects of the loss of sleep and fatigue.

Thus the Presbyterian Hospital is not only maintaining the best of its long cherished traditions for the healing of the sick, but it also is probing into the future for better use of drugs, or better drugs, and better techniques to perform the miracles of better health and a better chance for living when the crisis of life and death are in the balance.

## **Cook County Bureau of Public Welfare**

*(Continued from page 28)*

on December 10, 1945, under provision of the Searcy-Clabaugh Law. Since July, 1940, and up to the time of its reorganization the unit functioned as a division of the Bureau of Public Welfare.

The Central Administrative Office of the Health department is located at 737 South Wolcott Avenue, Chicago, in one of the buildings of the Cook County Medical Center. Four district health offices are maintained throughout the county to render more adequate service to the local communities.

The Department of Administration is under the direction of Edward A. Piszczek, M.D., M.P.H., Director; John B. Hall, M.D., M.P.H., Communicable disease Control Officer and Robert Dessent, M.D., M.P.H., Director of School Health.

On the staff are 14 professional personnel, a nurse supervisor and eight non-professional persons.

Services Rendered: Environment Sanitation—The sanitary engineers of the Cook County Department of Public Health have as their responsibility the improvement of environmental sanitation in suburban and rural Cook County. They make inspections, offer technical advice, and encourage installation of sanitary facilities which will protect and improve the health of the public.

Communicable Disease Control—An active immunization program is carried on against such diseases and sicknesses as chicken pox, diphtheria, smallpox, etc. Quarantine regulations are imposed and often nursing assistance is available. The functions of the Department of Health in control of tuberculosis are case-finding referral for hospitalization and follow-up after the patient is dismissed from the hospital. Other services are for infantile paralysis and venereal disease.

Maternal and Child Health includes the care and guidance of the mother through pregnancy and delivery and the care of the mother and the new-born after birth.

School Health includes physical examination and the proper follow-up to encourage the necessary correction of defects, chest x-rays; immunization and dental inspection forms an important part of the school health service.

First aid stations are provided.

Student training programs in public health for physicians, nurses and dietitians have been conducted by the staff during the past year.





# PRESENT EXPANSION PLANS

THIS report can well be concluded with a summary of developments expected to take place within a reasonable period.

It may be said deliberately that within the next five years the institutions existing within the boundaries of the Medical Center District at that time will have spent approximately \$50,000,000 in the construction of hospitals, research institutions, and schools devoted to medicine, dentistry, nursing and allied specialties, as well as in residential construction.

Combined net worth of the present component institutions has been estimated at \$100,000,000. This means that predicted new construction will increase the physical worth of the District approximately 50 per cent in five years, without taking into consideration many possible other additions to the services which cannot be forecast at this time but which will come as the result of this growth. We are moving forward rapidly and with assurance toward the ultimate goal of a \$300,000,000 Medical Center District, something without parallel as a world center for healing and life saving.

A review of expected early development is now in order at this point, as evidence in support of this conclusion:

The Veterans Administration is rapidly completing plans for the purchase of 13 acres of land in the District on which to construct a 1,000-bed acute general hospital of the latest design. Press reports estimate the cost variously, from 15 to 25 millions.

The University of Illinois in purchasing land for a 400-medical student residence, and a 300-unit nurses' residence. Its Physical Environment building is now under construction. The University hopes to secure additional funds with which to add to its general hospital. Plans for other additions to the University's medical campus seem to be moving toward favorable consideration.

The Cook County hospital group of 16 buildings will be improved and added to through the sale of \$7,000,000 in bonds voted for by the citizens of Cook county for that purpose. This will include a 350-bed multi-story interns' residence and improvements in the General Hospital. A half million is to be spent on the County Juvenile Detention Home.

The Illinois state legislature in 1947 voted \$5,500,000 for a State Tuberculosis hospital which will occupy 10 acres at Damen Avenue and Taylor Street, and for which the Medical Center Commission is now buying the land. The legislature also provided \$350,000 with which to build an Institution for Tuberculosis Research (BCG Institute, as it is now becoming publicly known). When built, BCG vaccine for the PREVENTION of "TB" will be sent anywhere needed in this country, in cooperation with the United States Public Health Service. The Medical Center Commission is also buying the land for this institute, at the request of the State of Illinois.

The noted Presbyterian hospital has plans for expansion on the drawing boards. It must also make provision for a new nurses' home and school, to replace the present large building devoted to this purpose which will be removed to make way for Congress Expressway.

The Professional Schools branch of the YMCA also faces the same problem, being also on land which will become part of Congress Expressway. The present building contains 340 rooms housing medical, dental, pharmaceutical and nursing students, and others allied with the District's activities. This institution has provided such valued services to

away-from-home students that there is a general desire by other institutions in the District to see the "Y" build a still larger building to replace the one to be torn down.

Loyola university is now engaged in a fund raising campaign aimed at the construction of a new research, healing and teaching group on land in the District which has already been selected, to replace its two present buildings. A general estimate is that this great project will probably cost around \$7,000,000.

The Chicago Medical Society, representing 6,000 physicians in this city, is also moving ahead in its fund raising program, with the intention of erecting a monumental edifice in the District facing Congress Expressway, to cost in the neighborhood of \$1,000,000.

Cook County Graduate School of Medicine, an outstanding practicing physicians' school which has been attended in the last 10 years by over 25 per cent of the physicians in the United States, must also move from the Congress Expressway site. It has plans for a distinguished appearing building, to be erected on land which it has already purchased, together with land which the Medical Center Commission is purchasing for it through use of its condemnation powers.

The Chicago Medical School, also in this District, has been making rapid strides in recent years under the energetic leadership of Dr. John J. Sheinin. It is also negotiating for a new and larger site to provide for its expansion needs.

In addition to assisting these great institutions in their progress toward ultimate development through assembly of land, the Medical Center Commission is charged with the task of cooperating with all concerned in establishing an ordered pattern of growth for the District. This involves the development and acceptance of a Comprehensive Plan, of zoning practices especially advisable for so unique and large an area, of agreement on building standards, of street patterns, and other utilitarian facilities.

In addition to this—because the Commission is obligated under provisions of the State of Illinois Medical Center Act to provide a healthful environment, plans are afoot to develop a first stage of park space. Parking accommodations are also in prospect. And land is also being purchased and being assembled into acreage areas suitable for construction of housing within easy walking distances of the institutions.

It can now be stated in this stage of our progress that the wisdom of the state legislature, in giving this vision of a great "Garden of Health" statutory form, has been proven sound beyond doubt by its heartening effect on both privately and publicly supported institutions in the District. It has encouraged formulation of planned purpose; and the methods provided by the Act, by which land can be expeditiously assembled and conveyed, are in themselves a vital contribution to efficiency in the conversion of urban land to a revitalized and better use than that into which an economic, social, housing, or legal disease has paralyzed it. We should not quarrel over causes when an answer finally appears. In seeking to aid health by endowing a Medical Center Commission in 1941 with a variety of powers and gradually with the necessary tools with which to organize a blighted area into a small specialized community, the legislature perhaps has found a method of healing that dread urban disease called blight, affecting all cities.





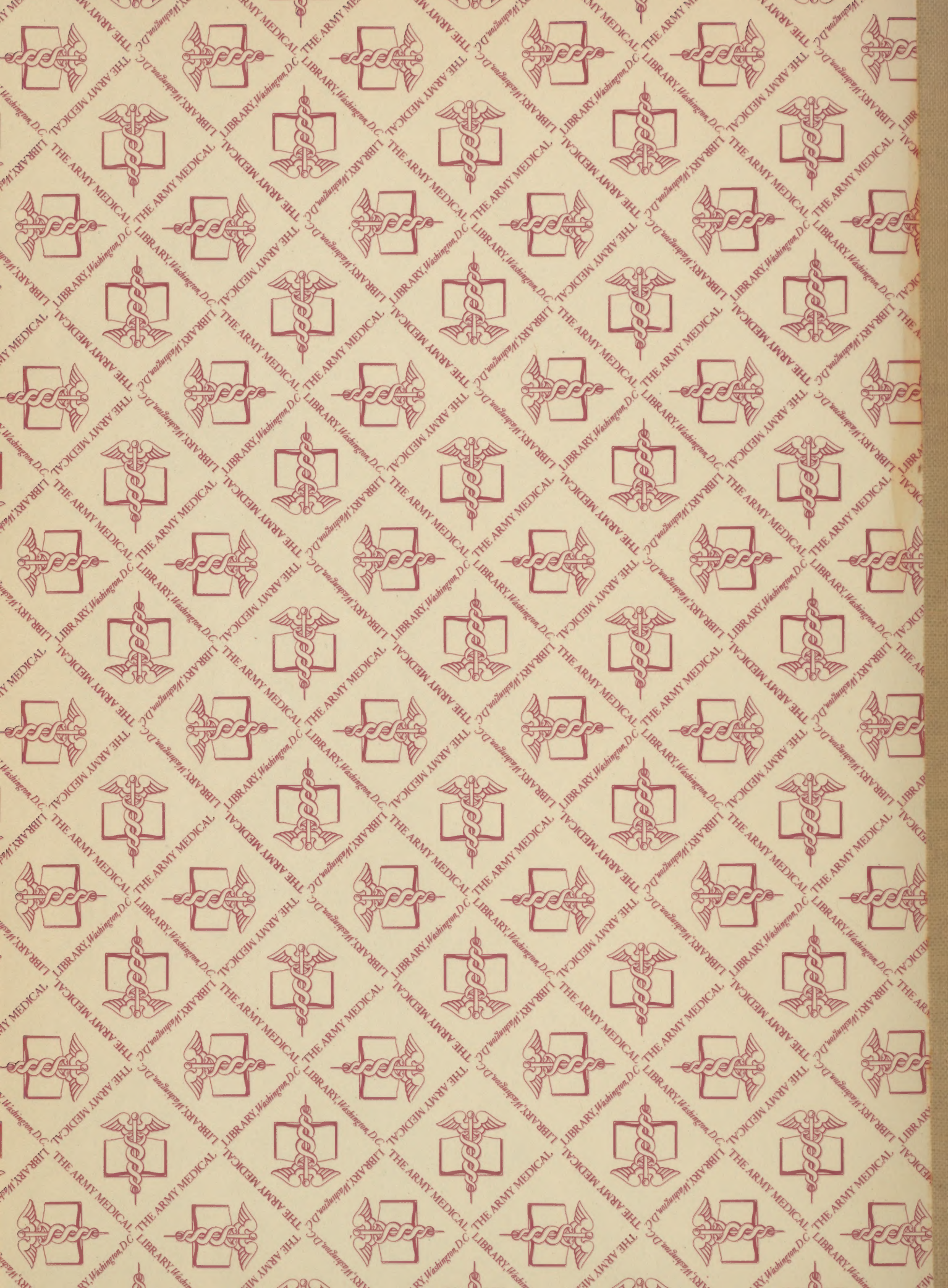














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